

PROMOTING INJURY AND VIOLENCE PREVENTION IN SELECTED COMMUNITIES OF NORTHERN MEXICO AND CITIES ON THE U.S. MEXICO BORDER

(VIP PROJECT)

FINAL REPORT

UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID), TECHNICAL OFFICE FOR EDUCATION AND HEALTH, USAID MEXICO



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FOMENTO DE LA PREVENCIÓN DE LESIONES Y VIOLENCIA EN COMUNIDADES SELECCIONADAS
DEL NORTE DE MÉXICO Y CIUDADES FRONTERIZAS DE LOS ESTADOS UNIDOS DE AMÉRICA
(PROYECTO VIP)

FINAL REPORT

AGENCIA DE LOS ESTADOS UNIDOS PARA EL DESARROLLO INTERNACIONAL (USAID), OFICINA TÉCNICA PARA LA
EDUCACIÓN Y LA SALUD, USAID MÉXICO



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INTRODUCTION

This report presents the activities carried out during phase II of the Violence and Injury Prevention Program in Ciudad Juarez from September 2011 to April 2013.

It must be mentioned that the entire intervention was prepared through three pillars: the public health approach, perspective of human safety and health, and the socioeconomic model. These three elements created a potent synergy, leading to the design of an inclusive work plan with an appropriate human rights approach for the specific needs of the inhabitants of Ciudad Juarez, Chihuahua, Mexico.

We would like to highlight the fact that during phase II of the program a large amount of experience and information was produced, ranging from documents for building planning processes and coordination, to technical publications that will be massively distributed in Mexico and other countries of the Americas. Therefore, this report was written with an executive view that visualizes the processes for each one of the objectives and the role of persons and institutions that collaborated in the initiatives; the products achieved are described, as well as the final challenges and future steps.

The annexes to this report present the specific products briefly described in the body of this document, so that the reader may have access to the final product if he/she so wishes.

We expect this report to express an experience based on new and effective strategies for preventing injuries due to external causes, especially the lack of traffic safety and all types of violence. This was an interdisciplinary experience in cooperation with institutions from different sectors and with the active participation of the community.

This report presents all the products and activities carried out in the framework of this extensive experience to strengthen the initiatives for the prevention of violence and injuries due to external causes in Ciudad Juarez. We hope that, besides being sustainable, the proven and validated results of these initiatives may also be useful for other cities –whether they share a boarder or not— from this region and the world.

ORIGIN

The Pan American Health Organization (PAHO) and the World Health Organization (WHO) for the Mexico – United States boarder has been offering technical cooperation since 1942 to the entire boarder zone, including Ciudad Juarez. During the first decade of this century, the office started its cooperation in the prevention of chronic diseases and supported the creation in 2007 of the Center of Excellence for the Prevention of Chronic Diseases and Health Promotion. At the end of that year, important changes were observed in the life of Ciudad Juarez: the young people stopped playing in the parks, nobody walked through the streets, some restaurants closed and the media informed of a growing number of homicides. In 2008, there was an urgent need to strengthen institutional and community capacity, as well as the cooperation among institutions in Ciudad Juarez to face the increasingly serious situation of violence and a high incidence of injuries produced by it.

To advance in the design of an intervention that would enable us to have a direct influence on the risk factors detected, PAHO carried out two activities that produced the necessary initial inputs: a review of the regional and national strategies for the prevention of violence with a public health approach, and an open community consultation with federal, state and local institutions, the civil society and the academic community to receive proposals and suggestions on how to prevent violence and tackle its consequences. With this information, PAHO was able to identify the needs of different spaces, such as families, schools, workplaces, communities and society in general. One of the first steps was to contact Dr. Alberto Concha-Eastman, regional consultant of PAHO for the Americas, and the administrations of the Institute for Research and Development on Violence Prevention (CISALVA), WHO collaborating center of the Universidad del Valle in Colombia, to organize meetings with key stakeholders and follow-up the results of the community consultation.

As a follow-up of the consultation and review processes, workshops were carried out on the methodologies used in the observatories for citizen safety. These workshops were open to the federal, state and local institutions, and with the participation of officers of the Municipal Government of Juarez, the General Traffic Administration and The General Administration for Public Safety, as well as organizations of the local civil society and academics of the Autonomous University of Ciudad Juarez (Universidad Autónoma de Ciudad Juarez, UACJ) and the North Border College (Colegio de la Frontera Norte), among others. After reviewing the different types of observatories existing in Mexico and other countries at the workshops, Dr. Rodrigo Guerrero, ex-rector of the Universidad del Valle, mayor (2012-2015) of Cali, Colombia, and regional consultant of PAHO, was invited as an expert on violence prevention to work as an advisor for the establishment and initial operation of a citizen safety observatory in Ciudad Juarez. Although there was interest and willingness to work on a violence prevention initiative, there were still doubts that only an expert could answer. Through discussions generated by the implemented actions, a general action plan was designed for the creation of a model of a safety and citizen conviviality observatory.

To strengthen the cooperation that was started with the advisory of the expert and workshops, the information available in each institution was reviewed with the representatives of the governmental and academic entities and we established the indicators that would be used by the observatory. This was the birth of the Observatory for Citizen Safety and Conviviality of the Juarez Municipality (from here on referred to as “the Observatory”) at the end of 2008. This milestone made it possible to put into action the Violence and Injury Prevention Initiative in Ciudad Juarez, which as of February 2009 had its own Executive Committee formed by representatives of the UACJ, the Municipal Government and PAHO. Afterwards, a meeting was held with representatives of the Center for Accident Prevention (CENAPRA) —later called National Council for Accident Prevention (CONAPRA)—, ascribed to the National Health Secretariat, as well as the Health Secretariat of the State of Chihuahua. This committee held monthly meetings to follow-up project activities and give support to the development of the Observatory. las actividades y apoyar el desarrollo del Observatorio.

PARTNERS AND PARTNERSHIPS

The Violence and Injury Prevention Program in Ciudad Juarez was fostered by partnerships with key institutions: UACJ, the Juarez Municipal Government, the Health Secretariat of the State of Chihuahua, and CONAPRA, with the coordination of the Mexico - United States Border Office of PAHO/WHO. Undoubtedly, this partnership was instrumental in the progress and success of the work done. These institutions, together with Health Jurisdiction No. 2, participated actively. CONAPRA was, undoubtedly, a great partner and collaborator, which contributed as an interlocutor with other federal actors present at the Juarez Municipality. It is only fair to mention the excellent work done by some offices within the institutions, particularly from the Municipal Government, such as the General Municipal Traffic Administration, Comprehensive Family Development (DIF), and the Municipal Institute for Research and Planning (IMIP).

ACHIEVEMENTS

In order to evaluate how the general objective of developing an intersectoral and multidisciplinary model for violence and injury prevention in Ciudad Juarez – called VIP Model- was met, which could also be implemented in other cities, the North Border College concluded:

“In broad terms we may conclude that the VIP Project is in the process of articulating a public health intervention model focused on preventing violence and injury. However, it is important to use this model in Ciudad Juarez as a learning experience where certain limitations must be recognized to be able to articulate a clearer model that may become an effective intervention tool.”

And the evaluation report also included:

“There are achievements that cannot be denied, among which we would like to distinguish in the Observatory, the technical capacity of SAI as an information compiling and validation mechanism. Information is a tangible and valuable resource that must be strengthened and that may also generate resources for the general project itself.”

Four key components are identified in the VIP Model:

1. The Observatory, which through the Automated Indicator System (SAI) and other programs, form an institutional governance mechanism and an information generating resource for decision making and policy designing
2. Training on safety and violence and injury prevention, achieved through workshops and educational materials
3. Social and scientific communication, the workshops with journalists and the award given to the media, which made it possible to improve the quality of the information offered to the public
4. Primary health care of the victims, particularly mental health, by training health professionals and promoters in the community, with the participation of different agencies and institutions (figure 1).

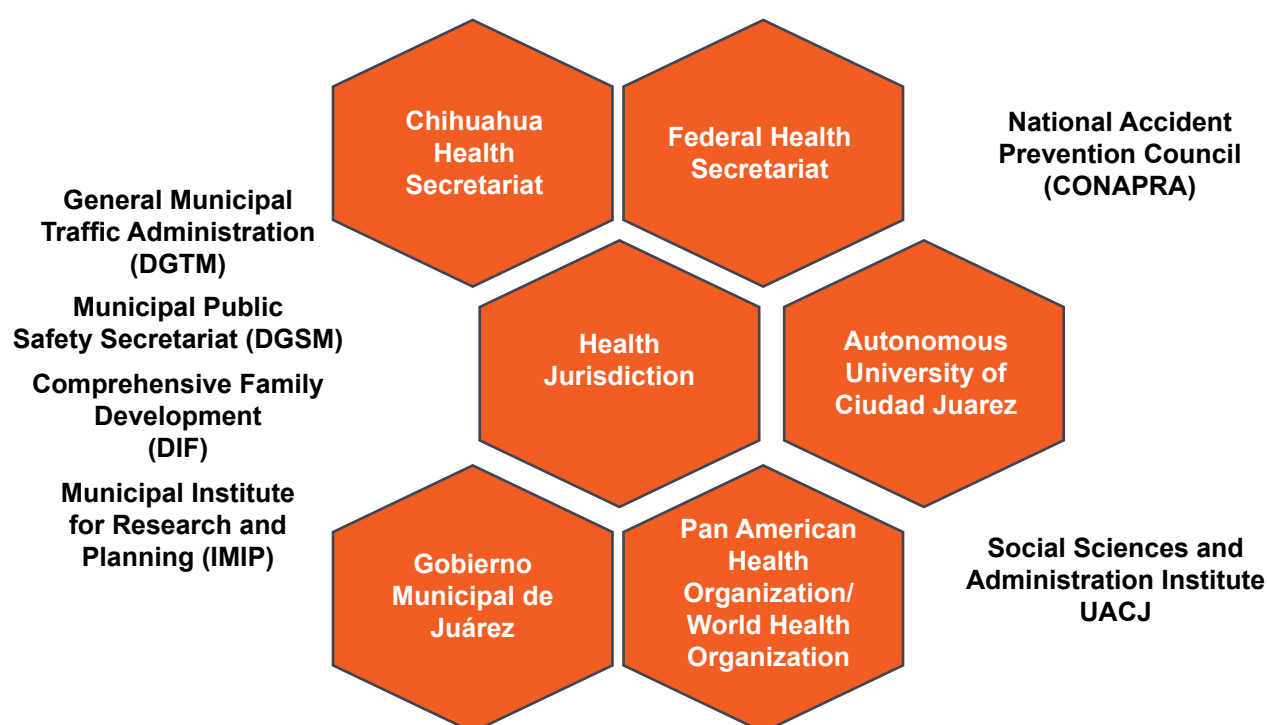


FIGURE 1. Agencies and institutions participating in the VIP Model

These components of the VIP Model are connected by processes that enable the articulation of interventions and the knowledge needed to create a governance mechanism focused on the prevention of injuries due to external causes, the promotion and inclusion of the VIP Project in the public agenda, and the building of community actions and development capacities (figure 2). In each one of the processes there are specific programs that translate the objectives into concrete actions to attain the established results or effects.

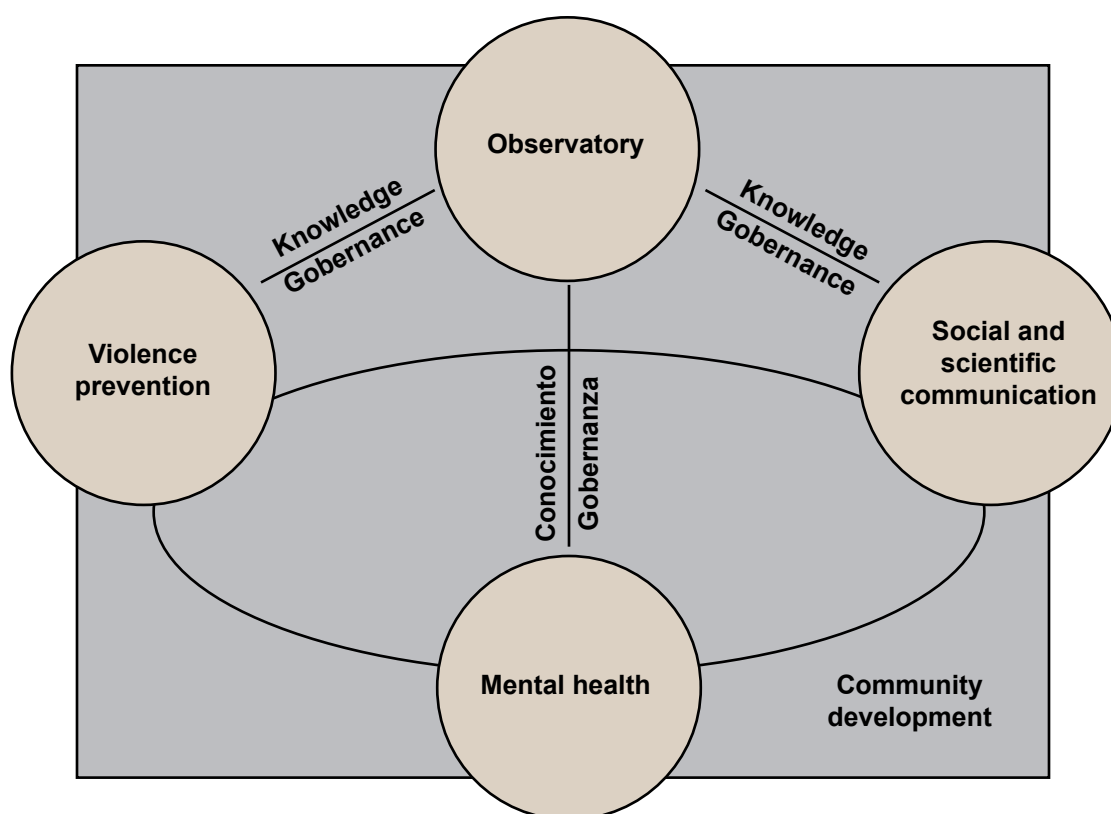


FIGURE 2. Diagram showing the process required to articulate the intervention and meet VIP project objectives

The Observatory is the main articulating component, working as a governance mechanism and for knowledge input. It receives the information generated or collected by different actors and agencies, and processes this information through SAI, which analyzes and generates spatial reports— by combining statistics with geo-referentiation in maps- on the different expressions of violence, injuries, and mental health. These analyses serve as input for the group on public policies, formed by the participating institutions—which promote the agenda of interest both for the VIP Project and for the institutions themselves—, through the Evidence-Informed Policy Network (EVIPNet) and through policy briefs. (This product is presented in annex 1).

The social communication media feed the Observatory with information, while at the same time receiving from it the inputs to articulate the appropriate messages that would sensitize both the citizens and decision makers, in topics such as mental health. Similarly, the actions related to the capacity and community development are articulated through the links with community centers and art workshops (graffiti, clay modeling, photography and serigraphy).

The violence and injury prevention component is articulated with the Observatory by promoting the participation in the SAI of agencies directly and indirectly linked to mental health and law enforcement. Training is also focused on violence prevention and mental health, through a mental health Gap Reduction Action Program (mh-GAP), a diploma course on citizen safety and the program known as TEACH-VIP (Training, Educating, Advancing Collaboration in Health on Violence and Injury Prevention).

Mental health is another component that articulates with the three elements mentioned above through several processes, which include training of promoters in mental health as a social development strategy. The health component articulates with the others through training and policy briefs.

An important element of the VIP model is governance, since it is an articulation process of all components. Governance is the shared process of governing through which the government and its action and policy application levels (secretariats and governmental branches) carry out specific functions (research, social development, training, etc.), complemented by other non-governmental stakeholders. Through governance the stakeholders, agencies and institutions concur on the violence and injury prevention actions and the promotion of mental health, thereby strengthening primary health care and the treatment of violence victims. With its activity the Observatory created synergies between governmental institutions and civil society.

The achievements of the program include:

- The Observatory has been strengthened and is in operation with its office at UACJ, and having the participation of institutions from different sectors and a considerable group of municipal, state and federal agencies, as well as civil society organizations
- A group of institutions work with the explicit mandate of implementing policies and programs to reduce injuries due to external causes, through the information provided
- Mental health was strengthened and integrated into primary health care and the reference and counter-reference system was improved
- Care services for violence victims were strengthened
- Human resources in mental health were developed through training actions, which included a diploma course and several workshops
- Needs and resources in mental health were evaluated using international tools
- Local institutions are better trained for violence and injury prevention thanks to the TEACH-VIP program and the diploma course in citizen safety and violence prevention
- Training for gender violence prevention, against women and between intimate partners, was increased, as well as its relation with children and human rights through workshops; gender was a cross-section topic throughout the initiative
- A culture of conviviality and respect was promoted with the cooperation of journalists and communicators and the training of young people in workshops
- Research and development capacity of the recommendations for public policies improved through EVIPNet.

OBJECTIVE 1.

CONSOLIDATE THE OBSERVATORY THROUGH A GREATER INSTITUTIONAL CAPACITY AND PROFESSIONAL COOPERATION

AUTOMATED INDICATORS SYSTEM II (SAI-II)

TELE-INFORMATION PROGRAM FOR ELECTRONIC FILE MANAGEMENT (PROTEGE)

COMPREHENSIVE SYSTEM FOR ADDICTION INFORMATION ANALYSIS (SIADICC)

INFORMATION HOMOLOGATION SYSTEM FOR STATISTICS AND DIVERSE LOGISTICS (SHIELD)

PROMOTING TECHNICAL COOPERATION AND TRAINING OF THE TECHNICAL AND PROFESSIONAL STAFF OF THE OBSERVATORY AND OTHER INSTITUTIONS

GEOGRAPHIC INFORMATION SYSTEM OF THE BORDER ON VIOLENCE AND INJURIES

SUMMARY OF THE ACHIEVEMENTS OF OBJECTIVE 1

OBJECTIVE 1 CONSOLIDATE THE OBSERVATORY THROUGH A GREATER INSTITUTIONAL CAPACITY AND PROFESSIONAL COOPERATION

Technological infrastructure of institutions participating in the Observatory was improved by providing them with computer equipment – database servers and personal computers, among others—, as shown in figure 3.

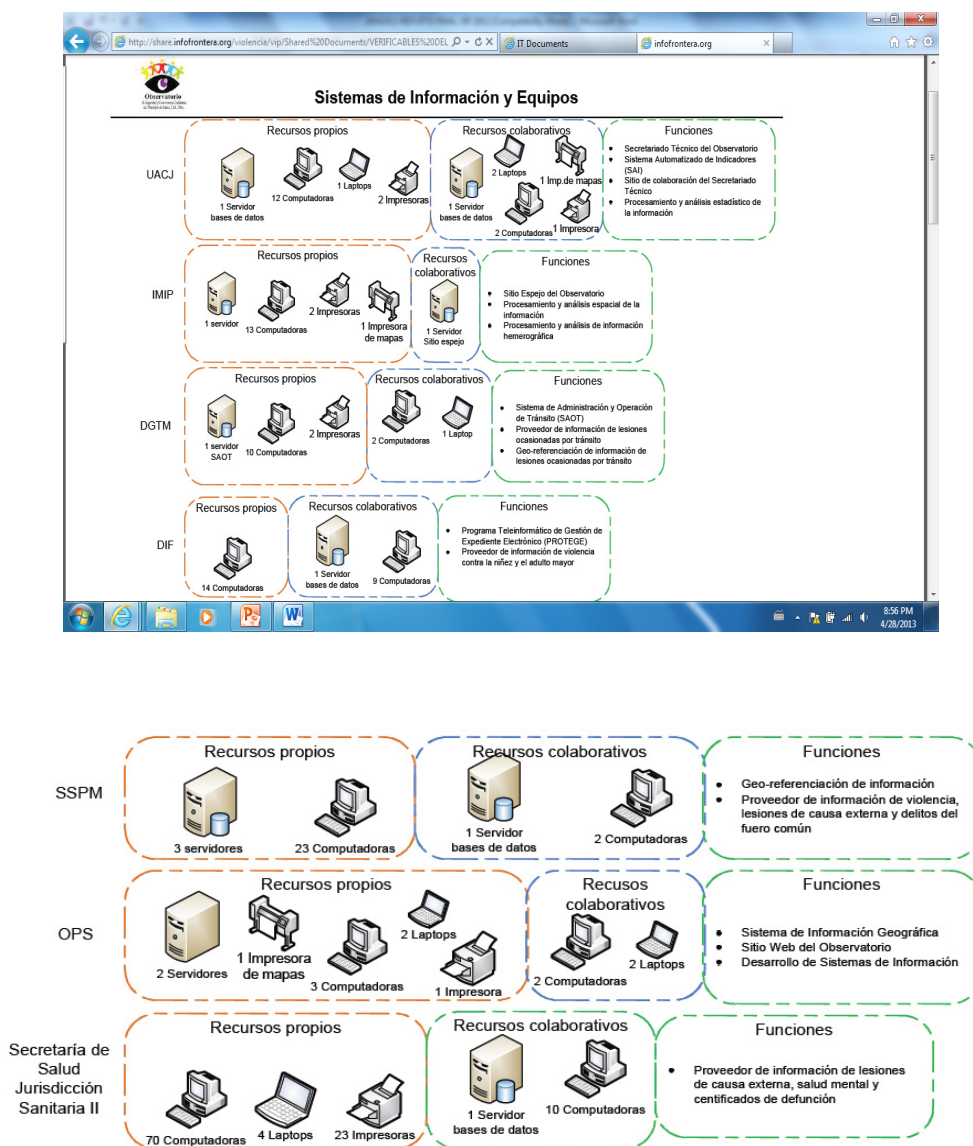


FIGURE 3. Distribution and functions of the computers acquired through the VIP Project

Ten personal computers and a database server were donated to the Health Secretariat. The computers will be used in the model units for psychological care to support the mental health information collection and analyses processes. The database server will make it possible to concentrate and organize information from the Secretariat, and the installation of the MS Sharepoint software, will enable the exchange of information and working documents with the different programs of the Secretariat.

PICTURE 1. Ten computers and one server were donated to the Chihuahua State Health Secretariat to support the collection of mental health information and analyses processes.



A database server was purchased for the Observatory, which will enable the operation of the SAI II program with its increased information storage and processing capacity. The server was installed at the UACJ and the administration and maintenance service will be given by the Information Technology area of that university.

PICTURE 2. Health professionals were trained on the standardized procedures for information collection.

Advisory service on design and operation of the information systems was also given to the institutions working with the Observatory.

Four information systems were developed for the Observatory and collaborating institutions, which are described below.

AUTOMATED INDICATORS SYSTEM II (SAI-II)

Objective: facilitate the exchange of information between the institutions that are the sources of information and the Observatory; compare the information on the same events through several databases and generate statistical tables and graphs.

Participants: UACJ, Juarez Municipal Government, PAHO and the Information Technology Group of the Observatory.

Achievements and expectations fulfilled

- It facilitates the exchange of information with institutions participating in the work of the Observatory
- Concentration of information from different institutions in the databases of the Observatory
- It enables the complementation and validation of information on the same event using databases from different institutions
- Web based system
- Reports, statistical tables and graphs are permanently available via the Internet
- Reports, statistical tables and graphs may be sent periodically to decision makers by email (figure 4)



Objectives: systematize the information collection process of reports on child abuse, generate statistical analyses and exchange information with the Observatory (figure 5).

Participants: State Attorney's Office for the Defense of Minors, Municipal DIF, Juarez Municipal Government and the Information Technology Group of the Observatory.

FIGURE 5. Electronic report format of the Electronic File Management Tele-Information Program (PROTEGE) of the Juarez Municipality Citizen Safety and Conviviality Observatory

Achievements and expectations fulfilled

- Reception of reports on child abuse is systematized
- Location of home address is determined by:
 - Updated catalogue of the IMIP of streets, intersections and neighborhoods
 - Map of streets and neighborhoods
- Electronic form to simplify filling-in the information
- Search on previous reports, since the recovery of existing information is facilitated
- It facilitates the creation of a report file since:
 - It generates the required documentation (summons)
 - It enables the introduction of information on proof of visits to the home of the accused, including pictures
 - It systematizes the information on the appearance in court and psychological assessment
- Sistema basado en la Web
- Los informes, las tablas estadísticas y los gráficos están permanentemente disponibles en Internet
- Permite enviar automáticamente informes, tablas estadísticas y gráficos a tomadores de decisiones de forma periódica por correo electrónico
- El sistema se pondrá en marcha en todos los municipios del estado de Chihuahua



PICTURE 3. Users of the Comprehensive Family Development Program had the opportunity of participating in the tele-information file management program (PROTEGE) from its development stage and make their contributions to improve its design.

This product is presented in annex 3.

COMPREHENSIVE SYSTEM FOR ADDICTION INFORMATION ANALYSIS (SIADICC)

Objectives: systematize information from the addiction rehabilitation centers, import information from the Epidemiological Surveillance System for Addictions of the Health Secretariat; generate statistical analyses and the exchange of information with the Observatory (figure 6).

Participating institutions: Health Secretariat of the State of Chihuahua, Health Jurisdiction II, UACJ, PAHO and the Information Technology Group of the Observatory.

PICTURE 3. Users of the Comprehensive Family Development Program had the opportunity of participating in the tele-information file management program (PROTEGE) from its development stage and make their contributions to improve its design.

The screenshot displays the SIADICC (Sistema Integral para Analisis de Informacion de Adicciones) web application. The header includes the system name and the logo of the Observatorio de Seguridad y Convivencia Ciudadana del Estado de Chihuahua. The navigation bar contains links for Inicio, Expedientes, SISVEA, Reportes, and Administración. The main content area is titled 'Expediente del Paciente' and includes a 'Salir' link. The form is organized into several sections: 'Datos Generales' with fields for Name, Sex, Date of Birth, and Age; 'Domicilio Actual' with fields for Address, City, State, and Postal Code; 'Datos Socioeconómicos' with fields for Occupation, Education, and Income; and a 'Mapa' section showing a Google Map of Ciudad Juárez. The form also includes a 'Observaciones' section for additional notes.

Achievements and expectations fulfilled

- Information from the addiction rehabilitation centers certified by the Health Jurisdiction II is systemized
- More than 75 variables are captured in the eight sections of the form: general data, contact information, socioeconomic characteristics, personal references, how they found out about the center, types of drugs consumed, sociological family diagnosis and action plan
- The updated IMIP catalogue on streets, intersections and neighborhoods is used
- Map for streets and neighborhoods is used
- Electronic form to simplify filling-in the information
- It can import files from the Addiction Epidemiological Surveillance System of the Health Secretariat, to generate statistical tables and graphs
- Web-based system
- Reports, statistical tables and graphs are permanently available via the Internet
- Reports, statistical tables and graphs can be sent periodically to decision makers by email

This product is presented in annex 4.

Objective: systematize information on violence and injuries recorded by the Municipal Public Safety Secretariat (figure 7).

Participating Institutions: Municipal Public Safety Secretariat, UACJ, Juarez Municipal Government, PAHO and Information Technology Group of the Observatory

PICTURE 3. Users of the Comprehensive Family Development Program had the opportunity of participating in the tele-information file management program (PROTEGE) from its development stage and make their contributions to improve its design.

Achievements and expectations fulfilled

- It is based on variables contained in the homologated police report form
- More than 40 variables are captured for the database
- The updated IMIP catalogue on streets, intersections and neighborhoods is used
- Map for streets and neighborhoods is used
- Electronic form to simplify filling-in the information
- Web-based system
- Reports, statistical tables and graphs are permanently available via the Internet
- Reports, statistical tables and graphs can be sent periodically to decision makers by email

The screenshot displays the SIADICC (Sistema Integral para Analisis de Informacion de Adicciones) web application. The header shows the system name and logo. The main menu includes 'Inicio', 'Expedientes', 'SISVEA', 'Reportes', and 'Administración'. The current page is 'Expediente del Paciente', which features a date and time selector (28/04/2013, 19:16). The form is divided into sections: 'Datos Generales' (Name, Sex, Date of Birth, RFC, Address), 'Domicilio Actual' (Street, Crossroad, Number, C.P., Colony, State, Locality, Phone, Cell), 'Observaciones' (Text area), and 'Datos Socioeconómicos' (Work, Education, Occupation, Schooling, Religion, Cpo.). A map of Juarez is displayed on the right side of the form.

FIGURE 7. Patient file screen of the Comprehensive System for Addiction Information Analysis (SIADICC), of the Juarez Municipality Citizen Safety and Conviviality Observatory

This product is presented in annex 5.

PROMOTING TECHNICAL COOPERATION AND TRAINING OF THE TECHNICAL AND PROFESSIONAL STAFF OF THE OBSERVATORY AND OTHER INSTITUTIONS

A Basic Course on Codifying Medical Information, Morbidity and Mortality was carried out in the first quarter of 2012. The aim of the course was to have participants learn how to appropriately codify medical information according to the International Statistic Classification of Diseases and Health Related Problems, tenth revision, (CIE-10) and the Procedures for the Statistical Classification of Diseases, ninth revision, Clinical Modification (CIE-9-MC).

The course lasted 40 hours with the participation of 25 persons from different institutions, which included Women's Hospital, Juarez General Hospital, Libertad Civil Hospital and the Health Jurisdiction II.



PICTURE 4. Health professionals received training to strengthen their skills in codifying medical information related to morbidity and mortality.

Also, a Comprehensive Basic Workshop on the Use of the Integrated Geo-spatial Referenced Information system (IRIS) was held to train the staff from the Observatory on the use of this computer application developed by the National Institute for Statistics, Geography and Information Technology (INEGI) of Mexico. This links the geographic information with the statistics generated at the INEGI and at other units that produce and use geographic information. Eighteen specialists from the Observatory were at the workshop.

PICTURE 5. The Geo-statistical Analysis of Crime and Violence Workshop had more than 20 participants from the



Municipal General Traffic Administration, the Municipal Institute of Research and Planning, North Border College, the Juarez Municipality Administration and the Observatory, among other institutions.

Two Geo-statistics Analysis of Crime and Violence workshops were carried out, which were aimed at increasing the understanding of the theoretical support on which spatial criminology and cartographic criminalistics are based, as well as the rationale for the development of geo-statistical products in criminology, with the aid of geographic information systems.



PICTURE 6. There was a large number of professionals participating in the two Geo-statistical Crime and Violence Analysis Workshops.

More than twenty persons from the Municipal General Traffic Administration, the IMIP, the North Border College, Juarez Municipal Administration and the Observatory, and other institutions participated in the workshop. Each workshop lasted 40 hours.

GEOGRAPHIC INFORMATION SYSTEM OF THE BORDER ON VIOLENCE AND INJURIES

Electronic map systems that were compatible with the geographic information system were obtained for the geo-referentiation of the locations at which injuries due to external causes were produced in the 41 municipalities of the northern border of the Mexican Republic (figure 8).

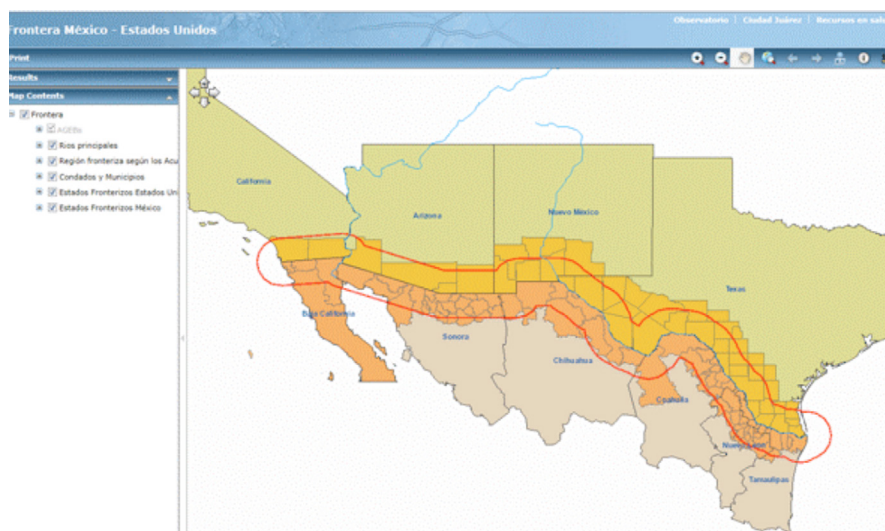


FIGURE 8. Dynamic map of the Mexican-USA border zone in the site of the Juarez Municipality Citizen Safety and Conviviality Observatory

The demographic information is available in interactive maps through Internet at the Observatory website (<http://mapas.observatoriodejuarez.org/frontera/>).

SPATIAL DIAGNOSIS OF TRAFFIC INCIDENTS

The typology, location and dynamics of traffic incidents recorded in Ciudad Juárez are done with this diagnostic tool.

This tool is very useful for the institutions responsible for the control and prevention of traffic incidents. The published information enables a spatial analysis of the accidents, their frequency and magnitude, as well as to determine the most frequent locations, the most common traffic incidents, and the number of persons affected and their characteristics. This information can be used to design specific actions to reduce these events and improve the quality of life of the Juárez population (figure 9).



FIGURE 9. Presentation of spatial diagnosis of traffic incidence in Ciudad Juárez, Chihuahua

This could be done through the cooperation of different entities, such as the Municipal General Traffic Administration, municipal IMIP and INEGI, which in a coordinated manner contributed with information, databases, cartographic material and statistical information on traffic incidents.

On correlating the traffic incidents with other urban indicators, this diagnosis makes it possible not only to know and understand more clearly how these incidents occur, but also to identify and control the risk factors associated to their occurrence. The final aim is to achieve a better understanding of the behavior, frequency, points and dynamics of traffic incidence in all streets of Ciudad Juárez in 2010, thereby improving the design, application and evaluation of the policies in this respect.

This product is presented in annex 6.

SPATIAL DIAGNOSIS OF THE INCIDENCE OF CRIMINAL ACTIVITY

This diagnosis offers elements to help visualize and understand the specificities and considerations of criminal activities of Ciudad Juárez, as well as identifying the critical geographic locations where they occur. This may serve as a reference for decision making in respect to policies, and for work on urban planning and public safety in the city (figure 10).



FIGURE 10. Presentation of spatial diagnosis of the incidence of criminal activity in Ciudad Juárez, Chihuahua, volume 2

It is important to clarify that the figures contained in this diagnosis come from databases of offenses of the Municipal Secretariat for Public Safety, obtained and processed by the Observatory.

The diagnosis was divided into the following chapters:

- Geographic and socioeconomic context. It contains a general synthesis of the geographic and socioeconomic context of the city and its districts, with information on the population, its area, population density, levels of wellbeing, and occupation of the local population.
- Dynamics of offenses and crimes. A summary according to district is presented, which shows the data classified by groups of crimes and time frames ranging from the time of day to the yearly analysis.
- Spatial distribution of the offenses, crimes and victims. The information here is disaggregated according to each one of the six districts in the city; they show the type of crime committed, the time of day and the type of weapon used in homicides.
- Indicators. Statistical information and their geographic visualization are presented; this makes it possible to have a general overview of the offenses committed in the city and its sectors; the indicators are built according to the territory and the characteristics of the population and homes.
- Analysis of the characterization of criminal activity. The results from the analysis of the information collected and processed are presented.

The information here collected on different offenses, crimes and victims are disaggregated in monthly, daily and time of day analyses.

This product is presented in annex 7.

SPATIAL DIAGNOSIS ON VIOLENT AND ACCIDENTAL DEATHS

The statistics presented in this spatial diagnosis are the product of daily and systematic records of deaths due to external causes, which were published in the main newspapers and periodical publications of the city in 2009 and 2010.

Hence, the numbers found in these volumes do not agree with each one of the violent or accidental deaths that were formally reported in the Juárez Municipality, since this information is not available with this level of disaggregation through any official source (figure 11).



FIGURE 11. Presentation of spatial diagnosis on violent and accidental deaths in Ciudad Juárez, Chihuahua, volume 3

At the beginning of the document we presented a general overview of the geographic and socioeconomic context of the city and its districts and their area, as well as information on the population, population density, levels of wellbeing and occupation.

This diagnosis has been divided into the following chapters:

- Geographic and socioeconomic context
- Synthesis of the occurrence of violent or accidental deaths
- Synthesis of victims in violent or accidental deaths
- Victims of homicides
- Victims of traffic accidents (run over, car crash, overturn)
- Victims of suicides
- Indicators
- Analysis of violent or accidental deaths.

The information of the events and victims are disaggregated in analyses according to month year and sex. In the cases of homicides, it is also disaggregated by the type of weapon used and the recorded reasons of the crime; in cases of having been run over, car crashes and car overturned, the time of the event is also recorded. In all cases the geographic reference of the event is recorded according to district and sector. On comparing the data of 2009 and 2010, according to month, a notable increase was found in injuries due to external causes in the city, specifically due to homicides.

In the chapter referring to the indicators, both the geographic and statistical information is recorded. Since indicators are built according to the extension of the region and the characteristics of the population and homes, the existing situation can be compared in the different sectors and its evolution can be visualized.

SPATIAL DIAGNOSIS OF THE INCIDENCE OF CRIMES AND DEATH DUE TO EXTERNAL CAUSES

The statistics presented in this document is the product of a combination of two sources of information: databases of violent and accidental deaths from IMIP, which are the result of the daily and systematic records of deaths due to external causes published in the main newspapers and periodicals of the city from January 1st to December 31st of 2005 to 2010; and the database of criminal activities—homicides, injuries, robbery and assaults— recorded by the Municipal Public Safety Secretariat, in this same period and provided by the Observatory (figure 12).



FIGURE 12. Presentation of spatial diagnosis on incidence of criminal activity and death due to external causes in Ciudad Juarez, Chihuahua, Volume 4

At the beginning of the document we presented a general overview of the geographic and socioeconomic context of the city and its districts and their area, as well as information on the population, population density, levels of wellbeing and occupation.

This diagnosis is divided into the following chapters:

- Geographic and socioeconomic context
- Synthesis of criminal events and victims of violent or accidental deaths
- Dynamics of the events and victims of violent or accidental deaths
- Grouping of victims of violent or accidental deaths
- Grouping of victims of homicides
- Indicators
- Incidence of criminal activity and homicides in 2010
- Analysis

The information of events and victims are disaggregated in quarterly and annual analyses and in groups according to the sum of the 6 years analyzed and by sex. In homicides, the data is also disaggregated according to the type of weapon used, the description of the location where the death occurred and finally the geographic reference according to district and sector. It must be pointed out that the records of years 2005, 2006, 2007, 2008, 2009 and 2010 were compared, which were characterized by a great deal of violence in Ciudad Juarez. This time analysis is of major importance and may be the key to understanding what is going on in relation to violence in this city.

This product is presented in annex 9.

SUMMARY OF THE ACHIEVEMENTS OF OBJECTIVE 1

- The information systems of the participating institutions were strengthened through the equipment and computer programs acquired
- Information systems were developed to generate web-based statistical and spatial analyses
- Conditions were created for the systematic exchange of information on violence and injuries
- Periodical bulletins were published with information on traffic injuries, occupational accidents, child and women abuse, and homicides
- Spatial diagnosis were prepared and published on traffic incidents, criminal activities and violent and accidental deaths
- Workshops were carried out to train traffic auditors and for the use of geographic information systems and a basic course for codifying medical information according to CIE-10 to improve the quality of death certificates

OBJECTIVE 2.

STRENGTHENING THE CAPACITY OF PRIMARY HEALTH CARE AND COMMUNITY ORGANIZATIONS FOR THE IMPLEMENTATION OF STRATEGIES, PROGRAMS AND SERVICES TO PREVENT VIOLENCE AND INJURIES

TEACH-VIP

DIPLOMA COURSE ON CITIZEN SAFETY AND VIOLENCE PREVENTION

EDUCATIONAL MATERIALS ON VIOLENCE AND INJURY PREVENTION

COMMUNITY DEVELOPMENT, VIOLENCE PREVENTION AND MENTAL HEALTH

EVALUATION AND MENTAL HEALTH TOOL

ACTION PROGRAM TO REDUCE THE GAP IN MENTAL HEALTH (MH-GAP)

ACHIEVEMENTS AND CHALLENGES IN MENTAL HEALTH STRATEGY

OBJECTIVE 2 STRENGTHENING THE CAPACITY OF PRIMARY HEALTH CARE AND COMMUNITY ORGANIZATIONS FOR THE IMPLEMENTATION OF STRATEGIES, PROGRAMS AND SERVICES TO PREVENT VIOLENCE AND INJURIES

The training strategy in the prevention of violence and injuries is based on four fundamental components that build capacity for decision makers, intermediate management personnel, academicians, members of the civil society and persons from the community, focused on public health (figure 13). Successful evidence based experience was employed, which could be adapted to the context of the United States Mexico border characterized by the high degree of violence in their cities, between the years 2007 and 2011.

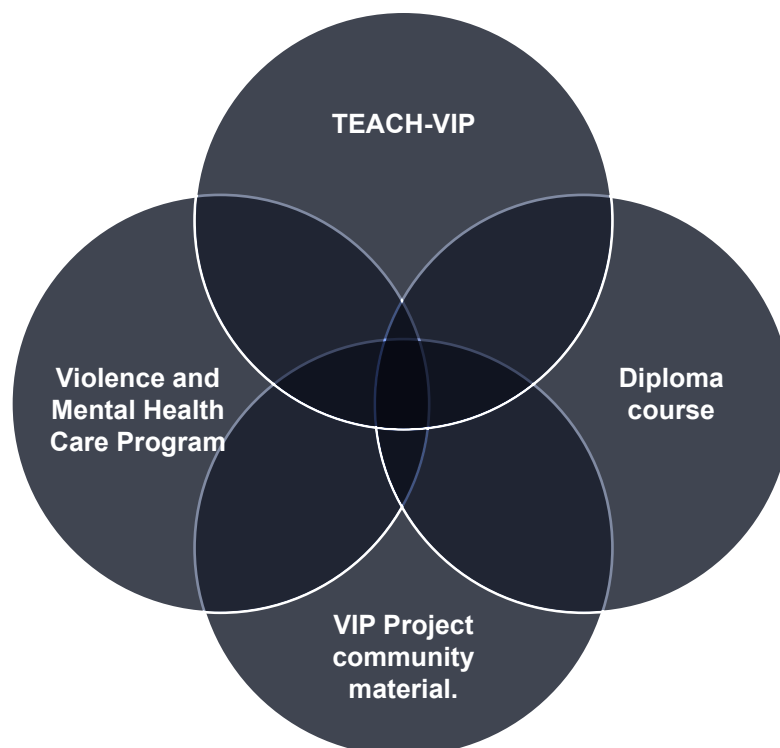


FIGURE 13. Basic components of the violence and injury prevention training program

The support and cooperation of local organizations and institutions were of utmost importance in carrying out this training strategy, through which we were able to reach key stakeholders. Also, the partnerships between them and PAHO made it possible to reduce planning and implementation time; in some cases we also had the joint investment of the local government, as in the case of the Diploma Course on Citizen Safety and Violence Prevention, for which the General Attorney's Office of the State of Chihuahua contributed a considerable amount of resources.

We also had the contribution of the municipal governments of Juarez and Reynosa and the state governments of Chihuahua and Tamaulipas, as well as the UACJ, the Autonomous University of Tamaulipas (Universidad Autónoma de Tamaulipas), the Observatory and the Executive Secretariat of the National Public Safety System, among others.

This objective was met through the participation of the National Public Safety System, the Government of the State of Chihuahua, the Municipal Government of Juarez, the UACJ, the Observatory, the Municipal Government of Reynosa, the Health Secretariat of the State of Tamaulipas and the Autonomous University of Tamaulipas, among others.

This first component is a potent tool that is mainly used to train students, professionals and workers of health and other sectors interested in preventing violence and injuries. It will also contribute to the development of prevention programs and policies, the design of effective surveillance systems and the evaluation of the interventions. The curriculum used for this is known as Advance (table 1).

Module	Lesson	Subject of the lesson
I. Injury prevention: general principles and methods	1	Injury prevention: general principles
	2	Injury investigation methods: data collection
	3	Injury investigation methods: designing studies
II. Injury information systems	4	Codifying and classifying injuries
	5	Trauma index and injury surveillance
	6	Communication of information on injuries for public health actions
III. Traffic injuries	7	Determinants and risk factors
	8	Planning and implementing interventions to prevent traffic injuries
	9	Practical applications of knowledge
IV. Injuries due to falls and burns	10	Injuries due to falls
	11	Injuries due to burns
	12	Falls and burns: planning programs
V. Drowning, poisoning and animal related injuries	13	Drowning injuries
	14	Poisoning in children
	15	Animal related injuries
VI. Child neglect and abuse	16	Child neglect and abuse 1
	17	Child neglect and abuse 2
	18	Child neglect and abuse 3
VII. Neglect and abuse of the elderly	19	Abuse of the elderly as a social issue
	20	Interventions to prevent abuse of the elderly
	21	Prevention, ethics and policies related to abuse of the elderly

Module	Lesson	Subject of the lesson
VIII. Youth violence	22	Youth as victims and victimizing persons
	23	Exposure to violence during youth
	24	Prevention of youth violence; prevention of victimization
IX. Gender based violence	25	Gender based violence: definitions, patterns and prevalence
	26	Gender based violence as a public health and a human rights problem
	27	Response of the health sector to gender based violence
X. Suicide and self-inflicted damage	28	Model of stress vulnerability and the process leading to suicide
	29	The public health approach: primary prevention
	30	Suicide prevention in public health and psychiatric units: secondary and tertiary prevention
XI. Care of injuries and rehabilitation	31	Trauma care systems
	32	Care before hospitalization
	33	Institutional care: acute cases and rehabilitation
XII. Ethical aspects of violence and injury prevention	34	Self-inflicted injuries, suicide attempts and suicide
	35	Involuntary injuries
	36	Violence
XIII. Promotion policies	37	Case study on promotion campaigns and media defense
	38	Case study on the development of pressure networks
	39	What to do when facing an empowered opposition



PICTURE 7. Participants in the TEACH-VIP training course at Reynosa, Tamaulipas (left) and Ciudad Juarez, Chihuahua, (right). Specialists in health, criminology, safety and similar topics specialists were in the course.

This training course was held in Ciudad Juarez in September of 2012 with 21 participants from seven institutions (Juvenile Integration Centers, Health Secretariat of Chihuahua, Education, Culture and Sports Secretariat, PAHO, IMIP, Municipal DIF and UACJ).

In November a variant of TEACH-VIP was given in Reynosa, Tamaulipas, with 35 participants from five institutions (Health Secretariat of Tamaulipas, Municipal Public Safety Secretariat, Municipal DIF, State Commission for Human Rights and the Autonomous University of Tamaulipas).

DIPLOMA COURSE ON CITIZEN SAFETY AND VIOLENCE PREVENTION

The second component of this strategy was the Diploma Course on Citizen Safety and Violence Prevention, for updating the persons in charge of designing, planning and enforcing violence prevention policies at the highest level. Its purpose also involved the strengthening of capacities and competencies of social and community actors linked to strategies for violence prevention and treatment of victims. This diploma course was carried out during the second half of 2012.



PICTURE 8. Participants in the Diploma course on Citizen Safety and Violence Prevention, in Chihuahua (left) and in Ciudad Juarez (right) in alternate sessions and in vivo transmission. A total of more than 40 participants were present.

The diploma course included the concepts and doctrines on safety; public safety; prevention of juvenile violence; empowerment of citizens for public safety and the proximity of the police; safety and human rights; citizens' participation and crime prevention; prevention and social re-adaptation in Mexico; safety and public policies; international protection of human rights; and finally, the prevention of violence and injuries from a public health perspective.

The duration of the diploma course was of 120 hours of classes, with the participation of the State General Attorney staff and the municipalities of Juarez, Delicias, Chihuahua and Parral, as well as professors and students from UACJ, and other participants.

The importance of the diploma course in the training of professionals should be highlighted, since one of the participants was the special attorney for prevention and another participant was the head of the State Center for Violence and Crime Prevention, as well as many other professionals belonging to both institutions.

EDUCATIONAL MATERIALS ON VIOLENCE AND INJURY PREVENTION

One of the most important innovations of the prevention strategy was to create an educational material on violence and injury prevention, with a communitarian approach that would cover this problem from a public health viewpoint.

The curriculum of "Prevention of Violence and Injuries: What can be done?" (figure 14) was tested in different workshops with community promoters, as well as policemen and criminology students.



FIGURE 14. Cover of the supporting material for the prevention of violence and injury in the community used in the workshops with community promoters, police officers and criminology students

Besides this educational material or the flip chart there was an eight-hour classroom training course to teach facilitators more detail on each topic and how to use the material.

This product is presented in annex 10.

Furthermore, a facilitator's guide was created so that even after participating in the training course, the facilitators would have access to other recommendations that would help them better understand the target population, plan workshops and distribute the time available in several sessions.

This guide, together with the flip chart, represents a powerful tool to sensitize the population on risk and protection factors that must be taken into account to prevent violence and injuries. Furthermore it offers evidence that may help improve their communities and their lives.

This product is presented in annex 11.

COMMUNITY DEVELOPMENT, VIOLENCE PREVENTION AND MENTAL HEALTH

The activities leading to community development, through the work of promoters specialized in violence prevention and mental health, were aimed at creating a culture of violence prevention and mental health promotion, as well as the early detection of problems of this type. This kind of intervention, besides facilitating the access to mental health services, would also help incentivize community cohesion and empowerment of the most vulnerable sectors. This has been one of the activities most strongly linked to other cross-sectional topics such as mental health strategy.

On the other hand, the strategy recognizes the need to work on risk factors of persons and communities, since they may lead to violent attitudes. Even when assuming that the neighborhood or community are factors that that may lead to violence when they are no longer a positive resource and offer living conditions that are incompatible with the minimum standards of society—frequently generating a social stigma—, prevention policies must be designed, articulated and applied in the neighborhood for the wellbeing of those directly affected, and for society as a whole.

Initially the intervention was for 10 municipal community centers, but it was soon increased to 32 centers, and the initial idea of training and follow-up became a more complete and robust line of action, both technically and administratively (table 2).

TABLE 2. Community development intervention stages by promoters specialized in violence prevention and mental health

Stage	Activity
1	Design of the intervention and development of the training curriculum
2	Invitation and sensitization of local actors and the demarcation of intervention zones
3	Selection of community promoters for training
4	Training process
5	Start of community promoters' activities
6	Monthly follow-up meetings for promoters
7	Starting the VIP project
8	Documenting the experience

Additionally, the promoters were trained in the following topics:

- Community diagnostic tools
- Non-violent conflict settlement
- Gender and violence against women
- Human rights
- Self-protection measures
- Addictions
- Abilities for life



PICTURE 9. Monthly follow-up meetings with community promoters, having the support of UACJ and the Chihuahua Health Secretariat for the reinforcement of abilities and contention.

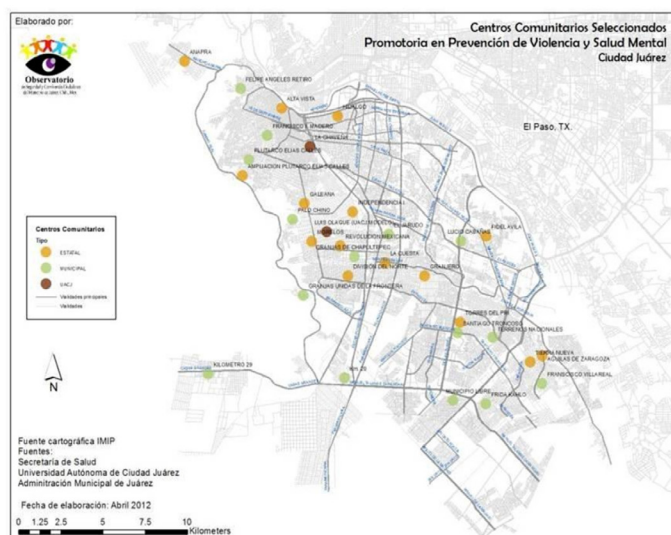


FIGURE 15. Distribution of the Municipal, State and UACJ centers participating in the community development intervention through promoters specialized in violence prevention and mental health

INTERVENTION IN THE COMMUNITY

- Three workshops were held to train 56 directors of municipal centers in mental health so that the personnel of the centers trained would be in line with the violence prevention and mental health promotion strategy and with community promoters.
- Fifty-three community promoters from five zones of the city were trained in violence prevention and mental health. They were convened by the citizen participation agencies of Social Promotion, the Health Secretariat, the Municipal Government of Juárez and UACJ.

- At the end, 60 community promoters were selected to substitute the persons that did not participate in the training stage, of which 36 had completed the course in December.
- Four subject directories were unified and updated; these respond to the needs and demands of the population with which the promoters are working; the subjects are: mental health, addictions, gender violence and services to the child population. The entries were located through a geographic information system, and the directories were distributed through the organizations and participants.
- One of the main achievements identified by PAHO personnel and by cooperators of this project, is the integration of the state, municipal and UACJ community centers to work together in a coordinated manner on a single strategy that would cover the entire city.
- After training the 53 promoters, 150 community groups were organized for violence prevention and mental health promotion through recreational, cultural and sports activities with the participation, until December of 2012, of at least 10,147 persons (table 3).

Month	Women	Men	Total	Promoters
January	436	217	653	16
February	444	195	639	16
March	512	206	718	44
April	970	417	1387	44
May	1157	408	1565	42
June	555	376	931	44
July	670	294	964	47
August	370	188	558	45
September	405	224	629	45
October	579	462	1041	42
November	437	257	694	37
December	218	150	368	28
Overall total			10,147	

TRAINING STRATEGY FOR THE PREVENTION OF VIOLENCE AND INJURIES

The most important results of this work include:

- The topic on the prevention of violence and injuries from a health viewpoint was included in the public agenda
- In relation to strengthening capacities to prevent violence and injuries, we were able to reach the highest levels of the State Government of Chihuahua (current state attorney for prevention and the director of the State Center for Prevention)
- We progressed in the aim of inserting the concept that links human safety with health in the local imagery
- National and international experts were linked to decision makers
- Educational material adjusted to the needs of the community were created
- Partnerships between the State Government, the Municipal Government and the UACJ were reinforced in working for a common purpose.

There are still certain elements (challenges) that must be faced, which are also lessons learned:

- The lack of continuity in certain activities
- It is essential to invest in persons from the community as agents for change
- The best ways of making changes in policies with few resources must be found
- More and more progress is needed to design comprehensive interventions linking violence prevention with topics that are addressed less, such as food and community participation
- Comprehensive projects must be established by the institutions of the city that share the responsibility of contributing to human safety, regardless of their origin.

INSTITUTIONAL STRENGTHENING AND MENTAL HEALTH TRAINING STRATEGY

The mental health strategy, as an element within the VIP Model, brings together interventions based on three specific areas to decrease the mental health gap and reduce the risk factors associated with violence. The strategy was focused on strengthening informal mental health services using an innovative program for training promoters and strengthening the primary health services through an intervention guide of the mhGAP Program.

Figure 16 shows the elements forming this strategy. The Observatory, as the first element, made the jump-start possible in an environment of reliability and certitude, through its links with the stakeholders. Epidemiologic surveillance in mental health and the reference and counter-reference system were then established for patients making use of the mental health services.

There are still certain elements (challenges) that must be faced, which are also lessons learned:

- The lack of continuity in certain activities
- It is essential to invest in persons from the community as agents for change
- The best ways of making changes in policies with few resources must be found
- More and more progress is needed to design comprehensive interventions linking violence prevention with topics that are addressed less, such as food and community participation
- Comprehensive projects must be established by the institutions of the city that share the responsibility of contributing to human safety, regardless of their origin.

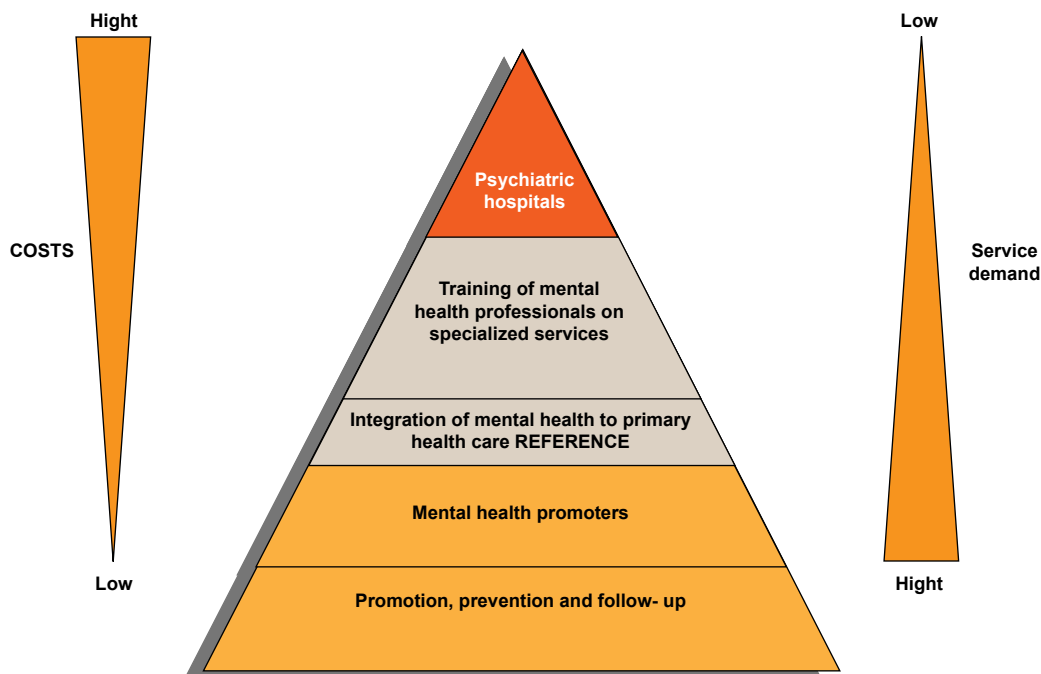


FIGURE 16. Adaptation in Ciudad Juarez of the mental health strategy of the Pan American Health Organization

The second element was the application of a mental health evaluation tool, making it possible for the first time in the city, to establish a baseline in relation to different aspects of mental health; two of the most significant aspects were the identification of the existing human resources—both in public and private institutions— and the location of the place where patients now go for care according to their disorders.

The third component was the intervention, fostered by the federal and local governments, but limited to the creation of a master plan without a true impact on mental health policy. However, we were able to progress in the formation of a collegial group to design political recommendations based on evidence. This group may contribute in the future, in a more focalized manner, to the identification of local problems and the design of recommendations.

COLLABORATORS

In community development activities through the work of promoters specialized in violence prevention and mental health, we had the cooperation of many agencies and institutions, for example at the federal level— the Health Secretariat—, of other states —the Autonomous University of Baja California and the Autonomous University of Tamaulipas—, of the state of Chihuahua —the Government of the State of Chihuahua, the Chihuahua Health Institute (Instituto Chihuahuense de Salud)— and at the municipal level —Municipal Government of Juarez, UACJ and the Observatory—, among others.

EVALUATION AND MENTAL HEALTH TOOL

The evaluation tool for mental health of WHO was used (IESM-WHO), through which we were able to establish a baseline that would be the reference for the evaluation of future developments of the action plans and intervention strategies for reducing the gap in mental health services. It must be stated that this is the first time that the scope of the application of this tool is a city, since it was designed to evaluate countries.

IESM-WHO enables the collection of information on the mental health system in six topics:

- Policy and legislative framework
- Mental health services
- Mental health in primary health care services
- Human resources
- Public education
- Evaluation and research

There were 14 public institutions and 18 private institutions participating in validating the document (table 4).

TABLE 4. Institutions participating in the validation of the mental health assessment tool (IESM-OMS)

Public institutions and level	Private institutions
Federal	
•Institute of Services and Social Security for State Workers State	•Association for the Protection and Defense of Minors
	•Esther Chávez Cano Friend's House, A.C.
	•Center for Family Advisory and Care, A.C.
•State Council for Prevention and Care of Within Family Violence	•Family Center for Integration and Growth, A.C.
•Chihuahua Women's Institute	•Life Project Family Center, A.C.
•Chihuahua Health Institute	•Mental Patients' Rehabilitation and Assistance Center
•Center for Comprehensive Hospital Care of Mental Health	•Human Growth and Education Center for Peace, A.C.
•Justice for Women Center	•San Juan de Dios Psychiatric Home, A.C.
•Comprehensive Family Development	•Speech therapy Institute, A.C.
•Liberty Civil Hospital	•La Tenda di Cristo (Christ's tent
•Children's Hospital	

Public institutions and level	Private institutions
<ul style="list-style-type: none"> •Health Jurisdiction II •Unit for Care of Victims •Unit for Sexual Offenses <p>Municipal</p> <ul style="list-style-type: none"> •Municipal Community Centers <p>University</p> <ul style="list-style-type: none"> •Center for Psychological Care (SURE) of UACJ 	<ul style="list-style-type: none"> •The Ants •Friendly Hand Amiga, A.C. •Horigen, A.C. •Companions' Program, A.C. •Without Violence, A.C. •Community Health and Wellbeing, A.C. •Juarez Life and Family, A.C. •Vision in Action, A.C.

This product is presented in annex 12

The main information given by IESM-WHO included the location of financial resources and —especially— human resources (figure 17) devoted to mental health, whether they were specific for psychiatric services or for ambulatory services. This information is essential for reorganizing the services and re-assigning the resources to increase response capacity of public and private institutions.

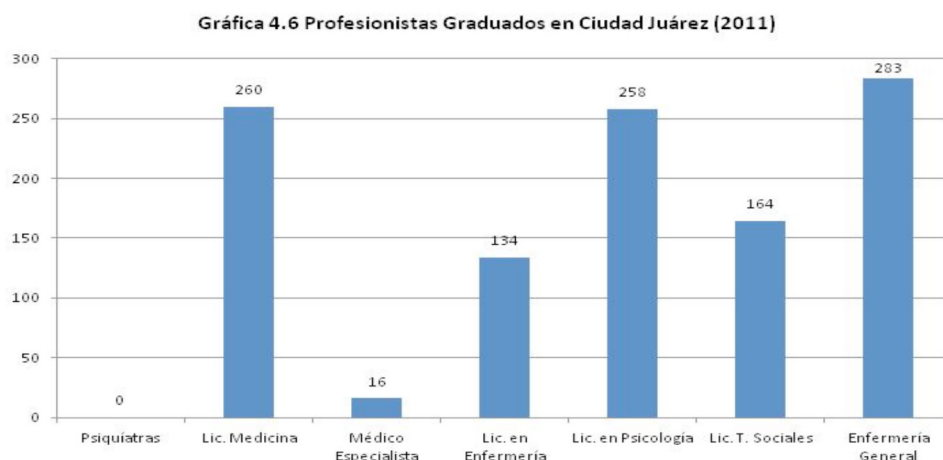


FIGURE 17. Graph showing the number of professionals graduating in Ciudad Juárez in 2011, according to their specialties

COMMUNITY PROMOTERS

The participation of community promoters specialized in mental health was aimed at creating and promoting a culture for the prevention and early detection of mental health problems. This required the need to encourage community cohesion and offer a mental health perspective for care and for channeling victims in a community violence context. A set of practical tools was available to participants, in the two days of the workshop, so that they could work on interventions and community diagnosis, violence prevention and the promotion of mental health. Training produced an awareness of promoters on the sociocultural context of this border city, characterized by its high psycho-emotional vulnerability; it instilled humane and social values, and helped them develop skills for their social prevention work. For this, they must work on identifying risks and formulating proposals, as well as building awareness and training the population, while also organizing community campaigns to reduce vulnerability and risk in mental health.

The methodology used not only equipped the promoters with tools and knowledge, but it was also able to recover and potentiate their skills and resources for a most effective contribution in improving interpersonal and community relationships, based on respect, trust and solidarity.

In order to carry out good community work and achieve the expected results the workshops insisted on the importance of the following pillars:

- Care and accompaniment
- Strengthening the communal system through follow-up visits and neighbor groups
- Working with populations at risk, by identifying and applying timely interventions for prevention
- Communal dialogue groups with specific populations (groups of mothers, life skills with children and teenagers, men groups, etc.)

Annexes 13 and 14 show the guidelines used for mental health promoters and facilitators.

ACTION PROGRAM TO REDUCE THE GAP IN MENTAL HEALTH (MH-GAP)



Picture 10. Training workshops for 47 mental health promoters, held in the facilities of the Autonomous University of Ciudad Juarez and of civil society organizations.

To face the great demand of mental health care, an action program was set up to reduce the mental health gap in the area. Nonetheless, due to the shortage of psychiatrists and specialized mental health nursing staff, not covering the demand, we had to carry out training activities in mental health with professionals and promoters.

TRAINING PRIMARY HEALTH CARE PROFESSIONALS

The training of personnel from primary care services was crucial in incorporating the appropriate care and prevention of mental health problems in these services. For this we used the Intervention Guide of the mh-GAP Program (figure 18). This guide is based on a systematic review of the evidence and it was conceived for health service personnel that are not specialized in mental health—when there are limited resources— offering the necessary tools to detect the main mental health problems in primary health care and giving them the appropriate follow-up.



FIGURE 18. Intervention Guide for the Action Program to Reduce the Gap in Mental Health (mhGAP) used in training

This product is presented as annex 15.

The initial training course was carried out from April 17 to 19 of 2012 with the participation of 38 primary health care professionals (doctors, nurses, psychologists and social workers) from seven institutions: Health Jurisdiction II, IMSS, the General Hospital, Women's Hospital, the Comprehensive Hospital Care Center for Mental Health, Libertad Civil Hospital and the Addictions Coordinator.

At the second stage we carried out four replications of the workshop, through volunteer multiplying agents that were trained at the initial workshop, and at a second regional training course was held on November 19th through 23rd of 2012 in Panama City, Panama. In these replications we had the participation of professionals from the Health Jurisdiction II, IMSS, the General Hospital, Women's Hospital, del Valle Health Centers, Liberty Civil Hospital and the Addictions Coordinator.



PICTURE 11. First training workshop for health professionals on the Guide mhGap, sponsored with the support of the PAHO central office and Health Jurisdiction II, with 38 participants.

The training course lasted 16 hours, that were distributed in 2 days and with the following activities:

- Presentations and critical analysis of the collective experience on the topic
- Review of the complementary audiovisual educational material
- Work in groups with case studies
- Review of the detailed clinical cases

This training course for professionals on the Intervention Guide of the mhGAP Program was later extended to the state of Sonora (table 5), and afterwards to the state of Chiapas.

TABLE 5. Mental Health Training for Primary Care Professionals

Place	Date	Number of participants
Ciudad Juarez, Chihuahua	October 25th and 26th, 2012	29
Ciudad Juarez, Chihuahua	November 15th and 16th, 2012	17
Ciudad Juarez, Chihuahua	December 6th and 7th, 2012	28
Nogales, Sonora	April 23rd and 24th, 2013	37
Nogales, Sonora	April 25th and 26th, 2013	30

Tests on the knowledge of participants in the framework of the mhGAP Program showed that 86 % of the participants expressed that they agreed, or totally agreed with their capacity to evaluate persons with severe depression and the indecisive group was reduced from 31 % to 9 % (figure 19).

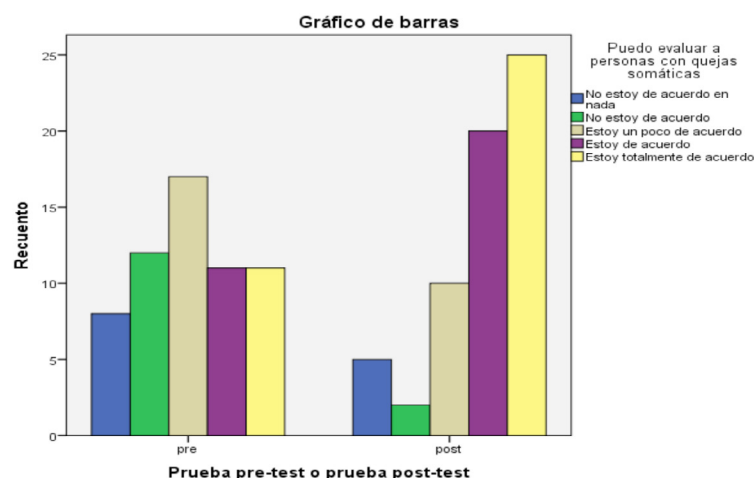


FIGURE 19. Evolution of the Capacity Test to evaluate persons with somatic disorders before and after training

In relation to the evaluation, the participants also showed progress in the diagnosis of disorders without medical explanation. Although at the start of the course, more than half of the participants (53 %) could not identify the disorders without medical explanation, and only 21 % could do so, at the end of the course 72 % was able to carry out this diagnostic, and only 17 % showed difficulties (figure 20).

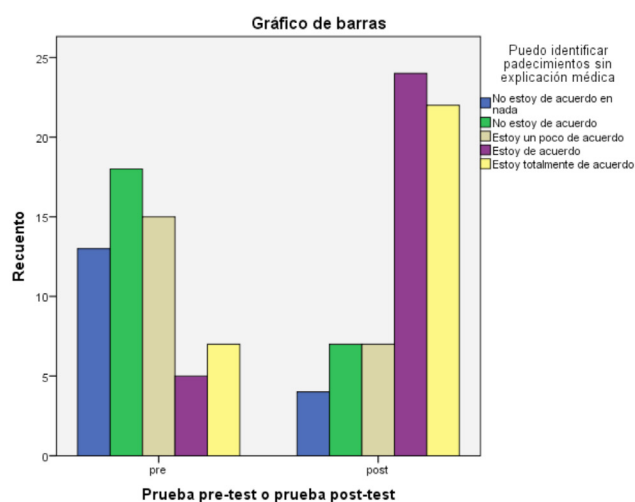


FIGURE 20. Progress of the identification of medically unexplained disorders, before and after training

TRAINING SPECIALISTS

Throughout 2012 and until April of 2013 there were 136 psychologists and psychotherapists trained in the workshops that covered three main topics. Some professionals went to more than one course, especially the diploma course in mental health focused on the care of victims of violence.

The topics were the following:

Care of children who are victims of violence

In Ciudad Juarez it is more and more necessary to have interdisciplinary and specialized training for children who are victims of violence. This training through workshops, designed for personnel linked to mental health care was especially necessary after the creation of the Fund for the Care of Boys and Girls that were Victims

of violence. This training through workshops, designed for personnel linked to mental health care was especially necessary after the creation of the Fund for the Care of Boys and Girls that were Victims of the Fight Against Crime, which groups more than 1 000 children under 18 years of age that have lost one or both parents through violence, and that have also suffered family and sexual abuse. Part of the program of this fund is the psychological care of 806 children of 0 to 5 years of age, 956 children of 6 to 12 years of age and 327 teenagers 13 to 18 years old, already enrolled, as well as special cases of support to nine teenagers over 18 years old (table 6).

TABLE 6. Training workshops for psychologists and mental health professionals caring for violence victimized children

Workshop	Date	Place	Number of participants
Sexual abuse in children	April 23-27th, 2013	Ciudad Juarez, Chihuahua	31
Post-traumatic stress in children	June 4-8th, 2012	Ciudad Juarez, Chihuahua	25
Post-traumatic stress in children	November 14-15th, 2012	Tijuana, Baja California	13

In addition to the staff of the Specialized Attorney for the Care of Crime Victims or Offense Cases of the State of Chihuahua, we also had the participation of specialists of the Center for Care and Advisory to the Family, the Family Center for Integration and Growth, A.C., the Justice Center for Women, TERAPET Ciudad Juarez, A.C., the Master's Course in Humanitarian Psychotherapy and the Psychological Care Center of the UACJ.



PICTURE 12. Workshop on post-traumatic stress in girls and boys, held in cooperation with the District Attorney's Office Specialized in the treatment of victims and crime offense sufferers, where more than 20 professionals were trained.

SUICIDE PREVENTION

A training course was held on October 8th to 10th 2012, in the Centuria Room of Hotel Lucerna, in Ciudad Juarez, in cooperation with the Health Secretariat and Health Jurisdiction II. In those three days we worked with psychologists, nurses, and social workers of the Health Secretariat and Health Jurisdiction to sensitize them on the importance of preventing suicide and on the taboo that surrounds it and prevents an open conversation on this. The workshop was focused on sharing prevention programs and community activities, as well as progressing towards the reliability of suicide certification and notification systems, requiring considerable improvement.

HUMAN RIGHTS AND MENTAL HEALTH

The purpose of this workshop was to promote participatory discussion with debates open to all participants and the exchange of practical experience on the importance of the human dignity concept, and how to deal with the psychiatric patient; it also discussed the current situation of basic rights and fundamental liberties of persons with mental disabilities. Participants defined actions and strategies that may be adopted in line with international standards and general norms on human rights, and a local network was formed for the protection and promotion of rights of persons with mental disabilities and their families, and to strengthen the surveillance carried out by state and national commissions on human rights.

The facilitators of the workshop were Dr. Javier Vásquez, human rights consultant and Dévora Kestel, M.S. who is the regional consultant on mental health, both from PAHO. The program lasted 12 hours, distributed in two days, consisting of presentations with the critical analyses of experience, group work and case studies, a final plenary session and the discussion on what to do now.

These workshops also had the support of Mexican and foreign experts on this topic, including Laura Martínez, from the Association for the General Development of Raped Persons, and Pavel Zárate from CLAVE Consultants.

ACHIEVEMENTS AND CHALLENGES IN MENTAL HEALTH STRATEGY

The work done within the framework of this objective led to important advances that may be the base for future development. These include:

- A key document was completed (from the IESM-WHO), which offered a clear general view of the human and financial resources in mental health
- The PAHO strategy was adopted for a community mental health model
- Considerable progress was achieved by including mental health in primary health care
- A program was created based on informal mental health services through community agents, which has been fundamental in the reference and counter-reference system in mental health
- The capacity of public and private institutions was strengthened in the care of victims of violence; the work in the network was consolidated.

We must still solve or complete certain mental health strategy elements, which are the current challenges and lessons learned:

- Continue the insertion of institutions within the electronic reference and counter-reference system
- Include beds for psychiatric care in general hospitals and create mental health community centers
- Support rehabilitation of persons with mental disorders through community based facilities and services, such as community residences, middle of the road homes, and day services.

OBJECTIVE 3.

OFFER SUPPORT TO PERSONS PERFORMING THE INTERVENTIONS ON INJURY AND VIOLENCE PREVENTION TO STRENGTHEN THEIR CAPACITY FOR KNOWLEDGE MANAGEMENT AND COMMUNICATION SKILLS

SOCIAL COMMUNICATION STRATEGY THROUGH ART WORKSHOPS FOR VIOLENCE AND INJURY PREVENTION

SCIENTIFIC DISSEMINATION AND BROADCASTING INFORMATION

OBJECTIVE 3

OFFER SUPPORT TO PERSONS PERFORMING THE INTERVENTIONS ON INJURY AND VIOLENCE PREVENTION TO STRENGTHEN THEIR CAPACITY FOR KNOWLEDGE MANAGEMENT AND COMMUNICATION SKILLS

SOCIAL COMMUNICATION STRATEGY THROUGH ART WORKSHOPS FOR VIOLENCE AND INJURY PREVENTION

A communication strategy was developed to prevent violence and injuries, with six components covering the factors that may have major effects on the target population (figure 21).



FIGURE 21. Components of the social communication strategy through art workshops for violence and injury prevention

The strategy and components are focused on the following topics:

Key topics

- Child abuse, particularly in achieving discipline without beating, corporal punishment and psychological abuse
- Domestic, sexual and intimate partner violence—including girl/boyfriends—, particularly in relations without violence of any type
- Violence among young people, particularly bullying, gangs and other expressions of delinquency; solve differences and conflicts without beating or psychological abuse and traffic safety

Cross-sectional topics

- Mental health: reduction of the stigma and reference system
- Alcohol: effects with major risks of violence and injury
- Gender approach: reduce stereotypes, for example, that girls are worth less than boys; that men have the right to discipline their wives; that women's freedom must be restricted; that sex is men's right, etc.

DIAGNOSIS OF COMMUNITY CENTERS

With the aim of obtaining the information for decision making in relation to planning, design and holding workshops, an initial diagnosis was carried out using a survey applied to mental health promoters of the VIP Project. We interviewed through the phone 39 of the 45 promoters working in some of the 16 community centers in the month of July 2012. The questions covered the following topics:

- Population they are working with at that moment
- Topics they are dealing with
- Main problems they look after as mental health promoters
- Number and age of the persons forming the groups they attend
- Art workshops that were offered at their community center
- Hours available at their center to open new workshops
- Type of spaces and infrastructure of their community center
- Days and hours when participation and assistance of different age groups, especially the target group in this communication strategy (children, teenagers and adults of up to 28 years old) are greater

With the information obtained we selected the community centers that could hold the workshops and the type and intensity of the promotion for each one of them to attract participants of the target groups. We also located these centers on a map so as to distribute the workshops throughout the city and achieve the best possible coverage.

- A key document was completed (from the IESM-WHO), which offered a clear general view of the human and financial resources in mental health
- The PAHO strategy was adopted for a community mental health model
- Considerable progress was achieved by including mental health in primary health care
- A program was created based on informal mental health services through community agents, which has been fundamental in the reference and counter-reference system in mental health
- The capacity of public and private institutions was strengthened in the care of victims of violence; the work in the network was consolidated.

COMMUNICATIONS ADVISORY COMMITTEE

For the creation of an advisory committee for communication strategy that would make decisions in relation to the definition of topics and messages that would be the basis of the social campaign, we invited representatives of governmental institutions and civil organizations of Ciudad Juárez that oversee the victims of violence. There were 15 representatives from 10 institutions: Chihuahua Women's Institute; National Commission to Prevent and Eradicate Violence Against Women; Family Formation and Development, A.C.; Network for Children's Rights in Ciudad Juárez, A.C.; International Youth Foundation; Deputy Attorney's Office for Legal and Social Assistance; Justice for Women's Center; Esther Chávez Cano Friend's Home; Women's Table Network of Ciudad Juárez, A.C.; and Specialized Attorney's Office for Attending Women as Victims of Gender Crimes; as well as the participation of five PAHO experts.

The members of the committee participated in the workshop Building a Multi-institutional Communication Strategy. At the workshop the participants shared information on the campaigns, communication materials—such as posters, brochures, publicity spots, etc.— and the experience related to violence prevention used by their institution, to find out the types of messages and the media used for violence prevention.



Slogans were therefore made against child abuse, juvenile violence and domestic violence (table 7).

Main slogan	Supporting message
Child abuse	For children, playing is as important as food. ¡Let us play!
Playing saves girls and boys	Let us make Juarez a friendly city for children
Home must be the place where boys and girls are protected and safe	A city that do not invest in its children is doomed to failure
We as society and the government are responsible for making greater investments on children	
Youth violence	
Change your attitude to change your city	Your positive attitude will improve your community
There are heroes among us	The change that you want to see is in your hands. You are the present and the future of your city
Your identity is unique, no one can make you feel less	Let us respect the differences of all and learn to live with them. Say no to harassment
Get involved	Participate in the construction of a community of change
Family violence	
Machismo hurts, it is painful, it separates, limits... kills	In our city, if violence is not taken into account or banned in time, it can end up in femicide... And you, ¿what are you waiting for?
When the blood comes from a battered woman, the wound hurts us all	In Ciudad Juarez, 8 out of 10 women have suffered some kind of violence

Since only three slogans were needed for each topic, in the fourth meeting the members of the advisory committee made a selection among the 7 ideas generated on domestic violence and 20 ideas on juvenile violence (on child abuse only three slogans were proposed). In this fourth meeting the advisory committee, the participants of Kolectiva Fronteriza and Women's Battalions presented a jingle with the topic "Machismo hurts, it is painful, it separates, limits....kills".

Besides the slogans and messages for each of the topics of the communications strategy of the VIP Project, the members of the advisory committee participated in the selection of the best work done for violence prevention and attention—produced at the serigraphy, photography, graffiti and clay modeling workshops of the community centers in relation to the main topics of the strategy— and in the creation and selection of ideas for posters and publicity spots for radio and television.

TRAINING ART INSTRUCTORS IN VIOLENCE AND INJURY PREVENTION AND IN MENTAL HEALTH

After having the advisory committee, the diagnosis, the slogans and support messages, a call was made for art instructors, particularly experts in photography, serigraphy, modeling with clay and graffiti. The idea was to have a group of instructors, who had experience in art and would also have a social commitment to introduce the violence and injury prevention topics in artistic activities.

After designing the call for art instructors of the violence and injury prevention project, we disseminated the message through all possible media to achieve a wide array of profiles; the proposals of the course program and quotations sent were analyzed, and the candidates were analyzed and selected according to the proposals received. The experience of each one of them with the technique they would teach at the workshop, their available working hours and the cost per hour of their work were also taken into account.

Actually, recruiting the art instructors was no easy job, since although the announcement was made in meeting places of the artists, no proposals were received. We had to go directly to see the artists and propose their participation in the contest for the selection of instructors. Another strategy was to search the blogs and emails of social networks (Facebook and Twitter) of art groups and directly invite them. The announcement was also made at the schools of communications, visual arts, graphic designs etc. It was especially interesting to see the work of art groups and the independent artists of the area, since these were sources of possible instructors for the workshops.

Finally the art instructor team was formed by plastic artists, graphic designers, and social communications specialists, who would be in charge of giving courses on clay modeling, photography, serigraphy and graffiti, using topics related to violence and injury prevention. They received a training course for this purpose, before starting the workshops, covering five aspects:

- Learn the communication strategy for violence and injury prevention and how the art workshops would contribute to this
- Learn the terms of reference of the activities of the instructor
- Become sensitized with the violence prevention and mental health concept
- Make collegiate decisions in respect to planning and giving the courses and the materials they would use
- Clarify doubts in relation to their participation as instructors

In the training course there were 19 instructors and 3 students from the UACJ who collaborated as assistants; the communication strategy of the VIP Project was explained to them, as well as their function in the workshops and in promoting the prevention of violence and injuries. The analyses and reflections also dealt with concepts of violence and injuries from the public health viewpoint, as well as the role of the promoter in mental health, the benefits of art-therapy and the skills the instructor must have, such as active listening, empathy, objectivity and integrity. Different techniques were used to promote reflection and the development of the above mentioned skills.



PICTURE 14. Nineteen art instructors and three supporting students during art workshops aimed at vulnerable populations to promote violence and injury prevention and the management of emotions.

The last part of the workshop led to establish four work tables, according to the four types of workshops that would be held (photography, clay modeling, serigraphy and graffiti), in which the instructors planned in a collegiate manner, the educational methods they would use and the list of materials needed, as well as the products they would obtain in each workshop, which should be related to the messages prepared and approved by the advisory committee. The educational plans of each art workshop may be found in the e-document *Manual for the Art Workshop for Violence and Injury Prevention and the Management of Emotions*.

This product is presented in annex 16.

ART WORKSHOPS AT COMMUNITY CENTERS

Children, teenagers and adults of Ciudad Juárez had the opportunity of participating in the art workshops for serigraphy, graffiti, clay modeling and photography. The main topics of the resulting products were on peace and the prevention of violence.



PICTURE 15. Twenty four art workshops were held in 18 community centers, with 365 participants.

Of the 24 workshops given between September and November of 2012 (6 of each type), 15 started in September and the rest were held between October and November.

The clay modeling and photography workshops were focused on children that were 6 to 12 years old and the serigraphy, in persons 13 to 29 years old; except for the serigraphy workshop held in September at the Granjas Unidas community center at which the participants were 15 to 53 years old. The latter produced an interesting and fruitful variant to the communication strategy, since the oldest persons organized a group that would enable them to be self-employed in the serigraphy business.



PICTURE 16. Boys and girls had the opportunity of developing clay modeling abilities, in the topics of violence and injury prevention, management of emotions and reinforcement of values.

The workshops had different schedules, according to the community center. The promoters worked very hard to reach the desired number of participants in each course, since, besides supporting the spaces for the workshops, they were also creatively in charge of the promotion within the surroundings of the community centers and neighboring communities (table 8).

TABLE 8. Community Centers where art workshops were held

Municipal level	State level	Autonomous University of Ciudad Juarez
	Altavista	Chaveña
Lucio Cabañas	Revolución Mexicana	Luis Olague
Palo Chino	La Cuesta	
Felipe Ángeles	División del Norte	
Frida Kahlo	Torres del PRI	
Santiago Troncoso	Tierra Nueva	
Granjas Unidas		
Municipio Libre		
Francisco I. Madero		
Jarudo		

We also had the cooperation of students from the UACJ who assisted and supported the courses, and they were also in charge of documenting the sessions of the workshops day-by-day through photographs and notes. Participants of the workshops created messages, figures and images supporting the selected topics. In general approximately 360 persons participated in the workshops and they made 700 artistic products related to violence and injury prevention; as an average each workshop had 15 participants.

DOCUMENTATION OF THE PRODUCTS

Once the workshops had ended on November 11th, the documentation work for each product was started by taking pictures of each piece; each photograph was complemented with labels containing the following information: workshop, name of the author, community center and instructor. A photographer and two assistants were hired to take the pictures.

Finally a Power Point presentation was made with 700 products from the communication strategy.

DONATION

To strengthen the work of the community centers and respond to the petitions made by three community centers to PAHO, the serigraphy stations, industrial plates, serigraphic blades and frames were donated (table 9).

TABLE 9. Community Centers benefitting from serigraphic stations or other Pan American Health Organization donations

Center	Serigraphic station	Industrial plates	Hot air pistols	Serigraphic blades	Frames
La Cuesta	10	1	1	20	22
Granjas Unidas	10	1	1	10	20
Torres del PRI	6	1	2	10	16
Total	26	3	4	40	58

PROFESSIONALIZATION OF MESSAGES AND PRODUCTS

Some of the posters produced had images obtained at the photography workshop. The selected publicity spots were produced for radio and television, after they were re-designed by the committee.

Prevention of Juvenile Violence (PVJ)

Publicity spot PVJ-1

Slogan: Your identity is unique; no one can make you feel less

Targeted at: the entire community

General Ideas: without fear to what they say; I am myself; we all have the right to dress the way we like; break the model; beyond appearances, they are good people

Scene: someone walking through the street, the camera only focuses on parts of the persons, like the feet (torn sneakers), hands (colored bracelets), hair (mojac hairdo, bald, extravagant haircut), pants (torn), shirt (with revolutionary messages); with the description of the clothes by focusing on details, at the end the entire person is focused and you see that the person is different from that of the stereotype made, for example, it is a lady, not a young man

Publicity spot PVJ-2

Slogan: There are heroes among us

Targeted at: General public

General ideas: build heroes; we are all heroes and we build a better future

Scenes: occurring in public transportation, the camera focuses on a lady sitting with a maquiladora working gown, movements show she is tired, a zoom to her hands; in the same transportation a man is seated behind, the camera is focused on his pants stained with paint or plaster, his knapsack is focused on the floor to represent a man that is tired and is coming home from work; a girl student is reading, a zoom is made to her hands with a book, her head is nodding off because she is sleepy; a child is also seen, who is seated in the same transportation next to his mother, the child gives his seat to an adult getting on the bus; this shows the efforts made by people in their daily lives, work to get ahead, raise children, etc.

Climax: We are all heroes

Publicity spot PVJ-3

Slogan: Get involved

Targeted at: young people

General ideas: show that we all belong to the planet Earth, that we are all part of a whole and that we come from the same place; that each one of us is fundamental for the planet

Scenes: the planet Earth is seen in the form of a jig-saw puzzle and we are all part of that puzzle, equally important and vital; if one piece of the puzzle is lost it is not complete; we are all children of planet Earth; each one of us is important

Climax: We came from and are going to the same place

Domestic Violence Prevention (PVF)

Publicity spot PVF-1

Slogan: Machismo hurts, it is painful, it separates, limits....kills

Targeted at: aggressors

General idea: demonstrate respect to women

Idea 1: it is important to generate a new conceptualization on how to demonstrate respect, stressing verbal violence on the street

Idea 2: sensitize the pain of a women living under violence, since it is a problem of us all, it is not private

Idea 3: re-educate men with new concepts and paradigms on how to act and behave in normal life; the story of this spot was adapted to a jingle called Fiu Fiu mamacita... presented in the fourth meeting of the advisory committee

Scenes: you see the silhouette of two dancers (a man and a woman) dancing to Fiu Fiu mamacita...; the dance has two stages: the first part shows macho behavior and abuse through dancing and an X (rejection) is presented on the screen; later the dance shows a respectful behavior and love between the couple, and a check mark of approval comes out on the screen

Publicity spot PVF-2

Slogan: When the blood comes from a battered woman, the wound hurts us all

Targeted at: general population

General ideas: show the fact that there are behaviors that are not normal and represent violence and that they multiply; stop macho behavior and abuse

Scenes: a man is seen that is about to beat his wife, at that moment there is a flashback and a child is seen observing the way his father is beating his mother; return to the present day, think about it, change your actions

Publicity spot PVF-3

Slogan: Machismo hurts, it is painful, it separates, limits ... kills

Targeted at: the entire community

Idea general: system of a society devastated by the replication of violent behaviors and customs

Scenes: a film is seen with a violent situation repeated by different actors; the film is projected in a movie theater that looks like Paradise and the projector operator is seen, there are silhouettes watching the movie but someone stands up and turns off the projector; a zoom is made at the hand of the person turning off the projector and the hand changes to represent men and women of different ages and social levels

Climax: Don't let the story be repeated...

Preventing Child Abuse (PMI)

Publicity spot PMI-1

Slogan: Playing saves girls and boys

Idea: girls and boys playing happily in their social category as children

Scenes: combine scenes in parks of different neighborhoods with scenes of children playing on the street; children accompanied by adults and children without accompaniment; in some scenes girls and boys play with tires or resources they have around them; an adult is watching them from the window or door of their home; a zoom is made to the eyes of children and adults (parents) to show how the adults must pay attention to the children; views of children playing on trees, piles of soil, etc.

Climax: Playing as an inhibitor of violence and promoter of friendly environments

Publicity spot PMI-2

Slogan: Home must be the place where boys and girls are protected and safe

Targeted at: adults in general

General ideas: highlight the importance of good conviviality, appropriate communication and family love; do not make this conviviality in a traditional manner; assign new functions

Scenes: the father is cooking, serves the table and a teenage son is helping the father in keeping the house orderly; a child aged 6 to 7 years received his mother who comes home from work and takes off her maquiladora gown and they sit and eat dinner together as a family, highlighting good conviviality and effective communication within the family; the children help their parents clear the table and wash dishes; the father goes out for a walk at a nearby park with his children and they play

Publicity spot PMI-3

Slogan: We as society and the government are responsible for making greater investments on children

Targeted at: society in general and the State

General idea: that society and the State must be responsible

Scenes: civil and governmental organizations at a working table generating a storm of ideas and writing them on the board, where some ideas are written (figure 22).

Government	Civil Society
<ul style="list-style-type: none"> • Investment of \$13 millions (national currency) for child care services • Strengthening children's welfare centers • Creation of a mother and child clinic • Research for infants • Municipality Council for infants • Children in the Municipal Development Plan • Creation of the Ciudad Juarez Municipality Children's Institute • Design policies for the protection of children's rights 	<ul style="list-style-type: none"> • Promote a law for the protection of girls and boys • Formation of a technical committee for monitoring the application of the Children's Rights Convention

FIGURE 22. Blackboard image with ideas for analyses, appearing in publicity spot 3

The professionalized messages, as a product are presented in annex 17.

PHOTO-DIARY AND ART EXHIBITION

A photo-diary was prepared through photographs and clippings of information on all phases of the process of setting up and operating the art workshops—an essential part of the communication strategy of the VIP Project—, as well as the work of the stakeholders involved in this objective with their respective functions.

The photo-diary shows and offers the documentation of products made at the art workshops, while reflecting the context in which they were carried out and recognizing the work of institutions and persons participating in it, either as enrollees, art instructors, mental health promoters, participants and members of the advisory committee (figure 23).



FIGURE 23. Cover of the photo-diary with photographs and information clippings, documenting the work of the 24 workshops on photography, clay modeling, serigraphy and graffiti, held in Ciudad Juarez between September and November 2012

This product is presented in annex 18.

The photo-diary also served as a guide to organize, by topics, the exhibit Art for the Prevention of Violence and Injuries and Management of Emotions, where approximately 100 of the 700 work produced at the 24 workshops of photography, clay modeling, serigraphy and graffiti were shown. The work produced is representative of the courses given at the different community centers of Ciudad Juarez from September to November 2012.

This exhibit formed part of the event Strengthening Communities for Violence Prevention, held on April 11 2013 at the Experimental Theater Octavio Trías, of the Paso del Norte Center, in Ciudad Juárez. Its aim was to acknowledge the work of 27 community promoters specialized in mental health and violence prevention, who worked for one year at the municipal, state and UACJ community centers.

The photo-diary shows and offers the documentation of products made at the art workshops, while reflecting the context in which they were carried out and recognizing the work of institutions and persons participating in it, either as enrollees, art instructors, mental health promoters, participants and members of the advisory committee (figure 23).



PICTURE 17. Some products generated in the 24 art workshops of the traveling exhibition “Violence and Injury Prevention and Management of Emotions”.

The exhibit was later transferred, from April 12 to May 12, to the Justice Center for Women. Later on, the traveling exhibit will be at other venues—including the UACJ and the National Commission for the Prevention and Eradication of Violence against Women—, even if the VIP Project has been completed.

It must be mentioned that together with the photo-diary, a Manual on Art Workshops in the Prevention of Violence and Injuries and Management of Emotions, was prepared; thereby documenting the actions of the Mexico - United States Border Office of PAHO/WHO, and the institutions participating in the communication strategy of the VIP Project. This manual (presented in annex 16) should contribute to the optimization of institutional resources and potentiate the community experience accumulated during the art workshops, a fundamental part of the strategy. We expect this document to also become a model for other institutions working at a national scale, since it covers the necessary activities to enable its reproduction and community actions leading to an efficient and timely execution of this experience. On systematizing the actions carried out in the community communications area of the VIP Project, its contextualization is possible in places where the workshops are reproduced, thus facilitating the participation of non-governmental organizations, governmental institutions and the community.

VIOLENCE IN THE MEDIA

Besides the activities described above, a strategic analysis was carried out for the reduction of the negative image in the media related to the violence in Ciudad Juarez, an observation of the information in the media of Ciudad Juarez and the exploration of the perceptions of residents.

One of the purposes of this study was to obtain a representative sample of the content of the information of the media in Ciudad Juarez. We also tried to clarify the perception of the public to the media and the violence in the city. The final objective was to have a better understanding of the function of the media, with the hope of highlighting its possible consequences, and perhaps, have an influence in the practices related to the coverage of the situations or the acts of violence.

One of the activities planned was to observe and document, for three weeks, the coverage of the violent situations made by the mass media in Ciudad Juarez, in order to identify the characteristics of the discourse through the analyses of guidelines and topics covered.

Furthermore, we explored the perception that the society had on the function of the mass media and the media consumption habits; we particularly explored the observations made by the children in their normal surroundings.

To guide this research, we would have to answer the following questions:

- How much attention does the media devote to violence topics?
- How does the degree of violence behave according to different sources?
- What are the most frequent perceptions on the repercussion of violence in the lives of the people of Ciudad Juarez and what is the function of the mass media? Could this be related to media consumption habits?
- To what type of violence are the children exposed in their normal surroundings and what do they perceive through the mass media?

Although we weren't intending to reach conclusions on the information contained and published by the mass media, we were able to address certain factors related to the awareness of the degree of violence present in the mass media. The information obtained on the degree to which the children are exposed to information on violence, through the mass media, the home, school and street, as well as the perception, knowledge and behavior in relation to media consumption habits, should be used to formulate more thorough questions on the effect of the mass media on the public and their possible function in the mental health of the population. The goal is to have the mass media themselves be aware of the negative effect of the information they publish and what they can do to mitigate the conflict-situation or conscientiously worsen it.

To reduce the negative image and strengthen the partnership with the mass media to incorporate initiatives and activities to prevent violence and injuries, with a better treatment of emotions, several events were held, which included a ceremony for the World Freedom of Press Day.



The topics included in the workshops and conferences highlight the ethics, freedom of expression and quality journalism; public health and journalism; organized crime and the mass media; ethics, communication and human rights, among others.

The participation included the social communication area of the Municipal Government of Juarez, the Attorney's Office of the State of Chihuahua, PAHO, the United States Mexico Border Health Commission, the UACJ and the Journalists Association of Ciudad Juarez, A.C., among others.

In order to promote human rights and prevent violence against journalists of the north border of Mexico, and as a part of the VIP initiative, on December 6, 2012 an open forum was held for journalists, information and communication science professionals and information and communication specialists of the north border of Mexico. The framework of this event held at the Octavio Trías Theater of the Paso del Norte Cultural Center in Ciudad Juarez, was the annual celebration of International Human Rights Day.

Experts on human rights and prevention of violence against journalists participated in the forum; these included Darío Fritz, program officer of Freedom House in Mexico, a prestigious organization from the United States, devoted to the promotion of democracy and the defense of human rights; Marco Lara Klahr, a journalist in topics related to crime, violence, rights and reform of the Mexican penitentiary system, with more than 30 years of experience and author of the Manual for Journalists on the Criminal Justice System. They are rights!; and Leticia Linn, consultant on relationships with the media and public information from PAHO, who worked as a journalist in Uruguay and the United States, and was the coordinator for communications of the Special Report for Freedom of Expression of the Inter-American Human Rights Commission, from 2007 to 2009.



PICTURE 19. “The journalists are a vulnerable social group in this context of violence, but they are also part of the chain of humiliation against the rights of other citizens. The violence they often suffer due to their work does not justify this type of journalism”, highlighted Marco Lara Klahr to more than 65 forum participants.

SCIENTIFIC DISSEMINATION AND BROADCASTING INFORMATION

The six main components in Objective 3 of the VIP Project, described in detail above, were complemented with other activities for professionals and researchers of Ciudad Juarez, particularly those with interventions in violence and injury prevention, in order to strengthen their capacity and skills in knowledge management and the communication of evidence.

FORUM ON POLICIES TO GENERATE KNOWLEDGE

A workshop was held from March 12 to 15 of 2012 on Tackling and Preventing Violence and Injury by Informed Public Policies with Evidence, with the aim of generating and increasing the knowledge on this topic and evaluating the efficacy of training and dissemination of evidence.



More than 30 local experts participated in this event—mainly UACJ and North Border College— as well as from other countries. The analysis was carried out in six work groups headed by thematic facilitators under the direction of methodological facilitators.

The experts in each topic provided the theoretical framework of the EVIPNet to the groups, through which they were able to identify the results and policies for tackling and preventing violence and injuries in a better and more effective manner. Working sessions in groups were held to identify the problems and the possible options to tackle them.

It was difficult for the groups to make a distinction between the priority problems that should be addressed and the causes originating them. It was also complicated to distinguish a tackling option and the tools used to carry out that option.

To continue the analysis started at the workshop, a follow-up meeting was held on December 4th and 5th of 2012. This time working groups were formed, according to four slogans and specific objectives: mental health (secondary level health care services), child abuse (prevention of bullying), social determinants of health (training young persons) and the media (developing skills for life in children and teenagers).

Important presentations dealt with methodological content, aimed at clarifying the problem and the analysis of an example of the summary of policies, through the EVIPNet methodology.

Indicators that could be collected to detect violence problems were also discussed, as well as comparisons made to establish the magnitude of the problems and possible options available to tackle them.

More than 20 work meetings (and first contact meetings) were held in Ciudad Juarez with local experts from nine institutions (UACJ, Center for Comprehensive Care and Mental Health Hospital, Comprehensive Family Development, Mental Health Coordination (Health Jurisdiction II), Health Secretariat of the State of Chihuahua, International Youth Foundation, Center for Updated Teaching of Ciudad Juarez, School of Higher Education in Psychology of Ciudad Juarez and the National Teaching University of the State of Chihuahua). The working group was strengthened on child abuse with new members.

As a result, we arrived at the following proposals to address this problem:

MENTAL HEALTH GROUP

The six main components in Objective 3 of the VIP Project, described in detail above, were complemented with other activities for professionals and researchers of Ciudad Juarez, particularly those with interventions in violence and injury prevention, in order to strengthen their capacity and skills in knowledge management and the communication of evidence.

FORUM ON POLICIES TO GENERATE KNOWLEDGE

To improve the access to mental health services in Ciudad Juarez, the recommendation was to strengthen the secondary health care service, according to the following options:

- Option 1: Extend and reinforce the human resources in mental health at the secondary level through several individual or combined strategies
 - Option 1.1: attract external human resources through financial or other incentives to promote professional development
 - Option 1.2: retain local human resources through financial or other incentives to promote professional development
 - Option 1.3: Increase local human resources, which would require the promotion of psychiatric education for local professionals in external education centers, promote the enrollment of local professionals in short classroom programs and foster the enrollment of local human resources in distance learning
- Option 2: Extend the services in mental health to the secondary health care level by the creation of:
 - Option 2.1: services of secondary health care in general hospitals
 - Option 2.2: community based mental health services

TRAFFIC SAFETY GROUP

Several policy options were recommended dealing with drivers of motor vehicles (four wheel vehicles), to prevent deaths and injuries produced by traffic accidents in Ciudad Juarez.

- Option 1: Review and reform, in each case, the legal framework in order to reduce or eliminate ambiguities and omissions
- Option 2: Offer safe driving classes and training to drivers of private motor vehicles
- Option 3: Develop a communication strategy to reduce risk and prevent deaths and injuries produced by traffic accidents

COMMUNICATION GROUP

The first option, of a general nature, was to recommend the design and operation of an educational and sensitization strategy to promote the development of life skills in children and teenagers from 6 to 18 years old. This should be complemented with the following measures:

- Option 1: Carry out an inter-sectoral education strategy of sensitization to promote life skills, which would cover:
 - Option 1.1: an educational and sensitization strategy aimed at formal education centers (elementary schools, public junior high schools and high schools) located in the most vulnerable areas of Ciudad Juarez; this strategy would be focused on teaching the children and teenagers the life skills through physical activity and sports, with sports activities within the curriculum and extracurricular, with an extended schedule
 - Option 1.2: a specific sensitization strategy focused on informal education centers (community centers)
- Option 2: Apply a communication strategy to promote life skills; this strategy is based on a communication and information campaign for children and teenagers of the most vulnerable sectors, which are a priority in this proposal. The campaign could also include a website, messages through manual communication devices (cell phones, tablets, video games, etc.), publicity spots that would be presented in children's or teenagers' programs or soap operas, posters and other graphic materials (such as fliers and three page leaflets) that can be disseminated through more specific channels for children and teenagers in a vulnerable situation (Health Secretariat, General Traffic Administration, etc.)

CHILD ABUSE GROUP

To prevent bullying in schools of Ciudad Juarez, comprehensive strategies that would include all actors within the school context are recommended, such as:

- Option 1: Offer continuous and permanent education to the teachers and administrators of the different levels and educational institutions of the basic level
- Option 2: Promote comprehensive preventive measures, for parents and tutors
- Option 3: Carry out a communication and awareness campaign
- Option 4: Establish an intersectoral and inter-institutional working system that would contribute to the prevention of bullying

TRAFFIC SAFETY GROUP

Several policy options were recommended dealing with drivers of motor vehicles (four wheel vehicles), to prevent deaths and injuries produced by traffic accidents in Ciudad Juarez.

- Option 1: Review and reform, in each case, the legal framework in order to reduce or eliminate ambiguities and omissions
- Option 2: Offer safe driving classes and training to drivers of private motor vehicles
- Option 3: Develop a communication strategy to reduce risk and prevent deaths and injuries produced by traffic accidents

TRAFFIC SAFETY GROUP

A call was made to devote a special volume of the Revista Panamericana de Salud Pública / Pan American Journal of Public Health to the topic of health and human safety. We received 39 manuscripts, and 14 were published after peer reviews and at least three reviews by the editorial board (2 editorials, 2 special reports, 7 original research articles, 1 opinion and analysis and 2 brief communications). The special volume was published in May of 2012 (figure 24) in a printed format, and it may be consulted on line through

http://new.paho.org/journal/index.php?option=com_content&task=view&id=102&Itemid=204.



FIGURE 24. Call for the special issue on health and human safety, of the Pan American Journal of Public Health / Revista Panamericana de Salud Pública, of June 2011 and cover of printed issue published in May 2012

To disseminate and promote this special edition we made interviews in audio and video formats with the editors and authors of the papers. In September 2012 it was presented at the Summit Meeting on Health and Human Safety, organized by PAHO.

This product is presented in annex 19.



PICTURE 21. The team in charge of selecting and evaluating the manuscripts for the special issue of the Pan American Journal of Public Health / Revista Panamericana de Salud Pública devoted to health and human safety

INTERNATIONAL CONFERENCE AND WORKSHOP ON PUBLISHING SCIENTIFIC PAPERS

A capacity building workshop on scientific writing of papers to be published in scientific journals was held on May 2 to 5 of 2012, in UACJ, under the sponsorship of the Mexico - United States Border Office of PAHO/WHO, for researchers in the field of biomedicine. This workshop, with 21 participants, was preceded by a general conference open to all persons interested, addressing the specificities of scientific publications from the scientific viewpoint.



Besides a thorough analysis of the theoretic aspects on the role of research and scientific publications in relation to the factors influencing the advancement of science (figure 25), three practical aspects were addressed: mastering the formal structure and content of a scientific paper, learning the editorial criteria that determines the acceptance of manuscripts and understanding the editorial mechanisms that are involved in the acceptance process of a manuscript.

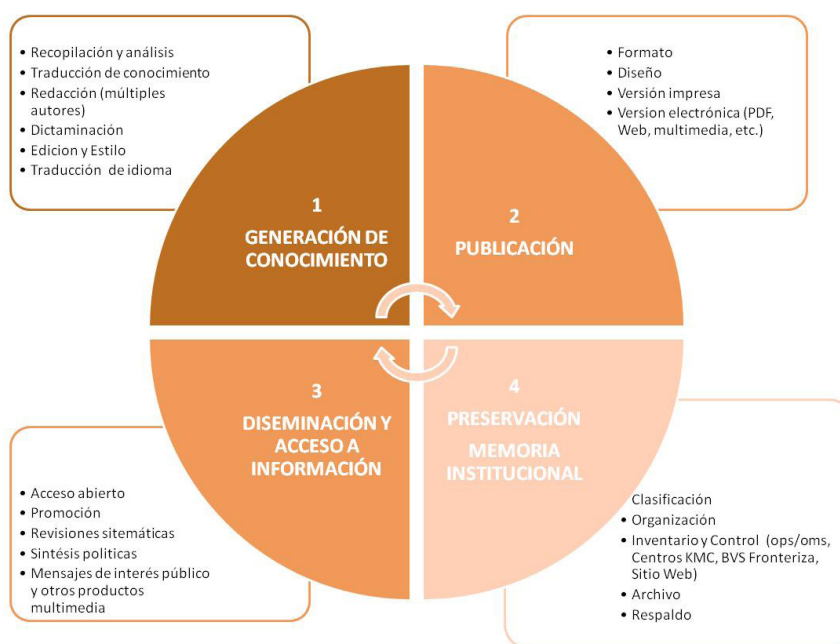


FIGURE 25. Components and processes of the development of science and dissemination of scientific advances addressed at the conference and international workshop on publishing scientific papers

The manuscripts processed at the workshop were closely related to violence and injury topics, such as the seat belts in children, the epidemiology of the fire arm injuries and bullying.

This workshop demonstrated the great potential of professionals from UACJ, their interest in participating in mainstream journals with greater visibility and the potential they have at this university.

As a consequence, the authorities of UACJ, with the logistic support of the Mexico - United States Border Office of PAHO/WHO, covered the costs of a new conference cycle with a workshop on September 10th to 22 of 2012, with the participation of specialists of other areas of the university, basically from social sciences

DISSEMINATION OF THE BEST PRACTICES IN THE TREATMENT AND PREVENTION OF VIOLENCE

Because of its practical importance, several initiatives were launched for disseminating the best experiences—that had been tested and validated with good results—in the treatment and prevention of violence, with special reference to mental health promotion.

Dissemination of the results of the Observatory

Fellowship holders and the UACJ and PAHO staff were trained to enter in index cards the technical production of the Observatory according to the international indexing standards, in order to offer more visibility through the Virtual Library in Border Health and other recognized databases and searchers, such as Google Scholar and LILACS. More than 400 records were entered.



PICTURE 23. The Observatory staff was trained to increase the visibility of their scientific and technical production through the Virtual Library in Border Health.

Translation of relevant documents

Through the joint effort of PAHO and other international and Mexican organizations we were able to translate into Spanish and disseminate the highly valued book *Violence prevention: the evidence*, which was originally published in English by WHO, and compiles important evidence from several countries. The purpose of this effort was to extend its dissemination in the Americas so that different local and regional stakeholders may consider this selected and systematized information when designing and launching policies and interventions to prevent the different forms of violence in our countries (figure 26).



FIGURE 26. Cover of the original version of a comprehensive collection of positive experience, difficulties and lessons learned in the struggle against violence, published by WHO in English and the translated Spanish version

This product is presented in annex 20.

EVALUATION

OF THE VIP PROJECT AND PROSPECTIVE DEVELOPMENT

WORK OF THE STEERING COMMITTEES

EVALUATION OF THE CAPACITY OF BORDER CITIES TO ESTABLISH
OBSERVATORIES FOR CITIZEN SAFETY

MONITORING AND PERFORMANCE EVALUATION PLAN

EVALUATION OF THE VIP PROJECT AND PROSPECTIVE DEVELOPMENT

WORK OF THE STEERING COMMITTEES

EXECUTIVE COMMITTEE

As established in the Work Plan of Phase II of the VIP Project, different authorities were called upon to form an executive committee in charge of:

- Establishing a schedule for meetings and activities
- Periodically reviewing the results of performance assessment, evaluating the progress in the activities of the VIP Project and the specific indicators, analyzing the difficulties and making recommendations with the aim of achieving the goals
- Reviewing the quarterly technical reports and final reports and making the recommendations to improve their accuracy
- Promoting the incorporation of new associates, encouraging the coordination and synergy with other programs and local, state and federal strategies
- Supporting the decisions made by consensus
- Conciliating the differences of opinion among members when voting

In its first meeting held on October 20th 2011, the Executive Committee was officially formed.



PICTURE 24. Members of the Executive Committee of the VIP Project. From left to right: Dr. Arturo Cervantes Trejo, technical secretary of the National Council for Accident Prevention, of the Health Secretariat; Lic. Salvador Calderón, representing the Chihuahua State Secretariat; Dr. Maria Teresa Cerqueira, head of the PAHO/WHO United States – Mexico Border Office; M.S. René Soto Cavazos, Director of the Administration and Social Sciences Institute of the Autonomous University of Ciudad Juarez and Lic. Jaime Muñoz Delgado, representing the president of the Juarez Municipal Government.

The support and guidance offered by the Executive Committee were essential in learning first handedly the activities carried out by local authorities. This made it possible to insert the VIP Project into the local strategies that were in operation before the start of the project, thus avoiding duplicity.



PICTURE 25. Eleven meetings of the Executive Committee were held during the implementation of the Project, between October 2011 and February 2013, with a monthly frequency (except for the months of January, July and December).

TECHNICAL ADVISORY COMMITTEE

The Technical Advisory Committee was created to give technical support to the working team and consultants that set up the VIP Project. Their functions included:

- Guaranteeing that the interventions proposed are based on evidence and provide the VIP project with technical management and guidance
- Together with the Executive Committee, it reviews the Monitoring and Evaluation Plan and suggests alternatives to accomplish the mission and objectives of the VIP Project
- Facilitating the contact with other academic and research groups working on critical elements of violence and injury prevention, community mental health services and primary health care of violence victims, among others
- Identifying and recommending the experts for the Speaker's Forum
- Providing guidance to the missions exploring the interests and possibilities of setting up the VIP Model in other border cities.

The Committee was formed by Dr. Devora Kestel, Regional Mental Health Consultant at PAHO; Dr. Marcelo D' Agostino, head of the Knowledge and Communication Management Area, PAHO; Dr. Lisa Cacari-Stone, assistant professor of the Health Policies Center of the University of New Mexico, United States; and Dr. Alberto Concha-Eastman, expert in violence and injury prevention, PAHO.

As special guests we had the participation of Dr. Sergio Peña, coordinator of the Monitoring and Evaluation Plan, the North Border College, and MS Roy Rojas, consultant for traffic injuries, Representation of PAHO in Mexico.

The Technical Advisory Committee contributed greatly in working on the VIP Project in a more effective manner. Specifically, it characterized the project's strengths and weaknesses.

Strengths: The number of products prepared through the project was considered a major strength, and the importance of the coordination structure was highlighted; this made it possible to establish partnerships to facilitate the progress of the project. The different technical components were able to interact – and they therefore mutually improved during the process of setting up and operating the project – and in cooperation and integrated with the Observatory

Weaknesses: There was no participation of an organized network of the civil society in the discussions and decisions of the VIP Project, which would be the guarantor for the sustainability of the project and its components. The analysis of the role of organized crime was lacking and this is a threat to the subsistence of the project itself. The project could have benefited from a family approach and a clearer reference framework, where the social determinants and ecological settings could arise more clearly, both in the analysis and definition of priorities and in the intervention modalities. In relation to social communication, the dissemination of the different initiatives has been good, but not enough; the communication strategy could have been expanded. Lastly, in spite of the duration of the project, there has been no information on its effect—either in general or of any of its components— within the community of Juarez.

As a consequence of the strengths and weaknesses identified, the following general recommendations were made:

- Establish an organizing, coordinating structure, similar to the current one, in charge of ensuring the continuity of some of the products of the project; this structure should include the stakeholders invited when necessary, and particularly, those that did not finally participate, such as the authorities representing education, police, etc.
- Define the basic indicators for an appropriate follow-up of the project during its progress and define a baseline of the information obtained, as was done with the IESM-WHO in mental health
- Analyze the policies and practices existing as of the project, both those that are working and those that are not working, to better define the possibilities of success if the project is replicated in other contexts
- Calculate the direct and indirect costs of PAHO —included in the costs of contributions “in kind “— and the operators to be able to analyze the cost-benefit ratio of the intervention
- Evaluate the possibility of carrying out a study after ending the project to collect the necessary information and determine the effect of the interventions in violence prevention

RECOMMENDATIONS ON THE MENTAL HEALTH COMPONENT

- Explore the possibility of carrying out a study that would give information on the relationship between violence and mental health; this would initially use the data of the promoters and the channeling that took place, including the primary health care and mhGAP Program staff
- Introduce elements from IESM-WHO into the Observatory, to ensure that certain relevant data form part of the local system and are regularly collected and analyzed; this type of system could serve as an example for many other contexts in the Region
- Evaluate the possibility of including the promoters in the different mental health services as mental health promoters or assistants (other countries have similar personnel working in mental health)
- Encourage the training of promoters by the Health or Jurisdiction Secretariat for which a training manual on the use of the Mental Health Guide may be convenient and this could be tested in a first phase
- Measure the effect of the VIP program in the analysis of the reduction of the size of the treatment gap in Ciudad Juarez



EVALUATION OF THE CAPACITY OF BORDER CITIES TO ESTABLISH OBSERVATORIES FOR CITIZEN SAFETY

Reynosa, Tamaulipas

On November 5th 2012 a forum was held on the Strategies for Violence and Injury Prevention, in coordination with the Municipal Government of Reynosa, the Health Secretariat of the State of Tamaulipas, the United States Mexico Border Health Commission and the Multidisciplinary Academic Unit Reynosa-Aztlán, of the Autonomous University of Tamaulipas.



PICTURE 27. The experience accumulated by the staff of the Juarez Municipality Observatory, Chihuahua, was shared with specialists of Mexicali and Baja California.

In April of 2013, the local institutions of Reynosa were in the process of establishing a local observatory and received a server from the VIP Project to start their activities.



PICTURE 28. The experience of the VIP Project and the Observatory of the Juarez Municipality, Chihuahua, was shared with authorities of the Reynosa Municipality, Tamaulipas.

Mexicali, Baja California

On November 12th of 2012 the Director of IMIP of Mexicali, Baja California met up with his work team to hear about the progress made in the creation of the citizen safety observatory. That same day different topics were addressed with the staff from the Municipal Public Safety Secretariat of Mexicali, mainly those linked with the generation of information and statistical data.

They agreed to collaborate in the future to establish an observatory in the city according to the possibilities of each institution.

Tijuana, Baja California

On November 13th of 2012 a meeting was held in the city of Tijuana, Baja California, with Dr. Leticia G. Blake Rivera, head of the Health Services Jurisdiction of Tijuana, and her work team. There they discussed several topics concerning violence and injury prevention and they agreed on exploring the possibilities of cooperation to improve the institution's capacity to tackle the violence situation in the city.

That same day, a meeting was held with Lic. Antonio R. Cano Jiménez, general coordinator of the Municipal Cabinet of Tijuana, his team of collaborators and specialists from other municipal areas. The head of the municipal DIF and executive staff from the municipal Public Safety administration also participated at that meeting.

The Forum on Violence Prevention and Injuries was held on November 14th at the facilities of Hotel Lucerna, with the participation of more than 15 public officers.



PICTURE 29. The experience of the VIP Project and the Juarez Municipality Observatory, Chihuahua, was shared with authorities of the Tijuana Municipality, Baja California.

In March 2013, the coordinator of the municipal presidential cabinet of Tijuana, arrived at the facilities of the Observatory in Ciudad Juarez and visited the institutions participating in its work.

Monterrey, Nuevo León

On April 8th 2013, the 80th anniversary of the Autonomous University of Nuevo León, there was a meeting to discuss the possibilities of establishing an observatory for citizen safety at the University, with the participation of Dr. María Teresa Cerqueira, head of the Mexico - United States Border Office of PAHO/WHO. The work done by the United States Agency for International Development (USAID) made it possible for the authorities of the municipality of Monterrey and the state of Nuevo León to learn of the experience of the Observatory.

The guests were Eng. Reynaldo Rodríguez Obregón, head of the Planning Division of the Prevention Sub-secretariat of the State of Nuevo León; Arch. Elizabeth Rosas, secretary for Human and Social Development; Eng. Alberto Ávila, coordinator of special projects of the Municipal Government of Monterrey; Lic. Oswaldo Uriel Reyes Torres, coordinator for prevention and head of the Citizen's Observatory; and Lic. Héctor Xavier Martínez, consultant for the rector of the Autonomous University of Nuevo León.

MONITORING AND PERFORMANCE EVALUATION PLAN

The North Border College, an academic institution at the Mexican border specialized in research, was in charge of designing the Monitoring and Performance Evaluation Plan of the VIP Project and its operation.

In their report they suggest the improvement of the webpage of the Observatory in Internet, so that it can clearly show the complete capacity and functionality of SAI-II, which is much greater than that shown now. This should be its main cover letter and should have a more important role in the communication strategy of the VIP Project. Furthermore, the data from the District Attorney's Office on Criminal Homicide belonging to the State Justice and Attorney General's Office should be used, which are official and updated.

The capacity for the geo-statistics analyses should be increased, since all the information has been treated as a discrete variable, i.e. it does not generate surface area maps or continuous variables through interpolation techniques, which could potentiate the spatial analysis of violence as a social event.

An analysis tool is necessary at a scale that would make it possible to generate the required information so that the community centers may have a socioeconomic diagnosis of the population in their area, and at the same time, it will enable the longitudinal monitoring of the population to evaluate the effect of the ongoing programs. Indicators should also be developed to carry out that monitoring in time.

An analysis should be carried out on the existing policies to be able to identify and document what has been done, their success and failures, so that the same mistakes are not made and to be able to concentrate all efforts in replicating those activities that have been successful.

In the future it is important to consider that the training of collaborators should focus not only on policies, but also on how to design and apply them. It is important to know how a topic (for example, mental health) gains visibility and is included in the public agenda until it turns into a program or a policy.

Social communication is also a component of Objective 3 of the VIP Project, and it is therefore recommended to adopt a media and social communication strategy to disseminate the achievements and benefits of this project, so that it can reach the position of a label of projects (for example, Poverty, Opportunities, etc.) and to be better identified by the community.

The design of the curriculum for comprehensive training must be effective and efficient. Currently there are several training workshops (mhGAP Program, TEACH-VIP, AIMS-WHO, Diploma Course on Safety, etc.) that are not articulated and require more time and resources.

Training and capacity building should include topics on the family, now inexistent. Also drug trafficking or organized crime must be part of the analysis of violence prevention.

Finally, a tool should be designed for the follow-up of persons attended by the program, to objectively evaluate the effect of the violence prevention actions and learn if they are really meeting their aim.

The complete final report is presented as annex 21.

CONCLUSIONS, CHALLENGES AND LESSONS LEARNED

In short, the VIP Project was able to meet the goals proposed and to establish a baseline for assessing future achievements from a qualitatively better situation.

In the first place, we were able to document an inter-sectoral and multi-disciplinary model for violence and injury prevention in Ciudad Juárez (here called VIP Model), which can be applied in other Mexican cities; presentations have been made in Reynosa, Tamaulipas; Tijuana, Baja California; and Monterrey, Nuevo León.

The Observatory is in operation at the facilities of the UACJ and with the participation of an array of sectors, a considerable group of municipal, state and federal agencies and civil society organizations. The participation of institutions with the mandates of applying policies and programs, and decision making for the reduction of injuries due to external causes was documented through the information generated by the Observatory. In the framework of the VIP Project a large number of activities were undertaken for training and prevention of violence and injuries, these include: TEACH-VIP; Diploma Course on Safety; gender violence prevention workshops, against women and against intimate partners; and workshops on human rights and children that are victims of violence.

Mental health was included in the primary health care services and the care for mental health problems, and the reference and counter-reference system for these cases was strengthened. The service for attending violence victims was improved— this was supported by a diploma course and several training workshops to develop human resources specialized in mental health— and the needs and available resources required were defined for mental health care.

The Observatory staff met up with journalists and communicators and participated in the workshops with young people to promote a culture of conviviality and respect. The cooperation with journalists and the owners of the mass media was systemized and recommendations were made for policies through EVIPNet.

There are, however, certain challenges that must be dealt with. In the first place, the subsistence and sustainability of the results and products obtained must be guaranteed by the joint work carried out in the framework of the VIP Project, over and above that of the Observatory.

Furthermore, the initiative must be expanded to multiply its effect and benefit other scenarios with similar characteristics to that of Ciudad Juárez.

To make the positive effects achieved long-lasting, it is indispensable to institutionalize the established components.

Finally, it is essential for all organizations and institutions to continue a more thorough study and to strengthen the prevention activities of violence and injuries due to external causes, as well as health promotion and human safety.

Notable results have been achieved, but the greatest challenge of all is to make the achievements last while tackling new challenges.

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- Annex 2. Automated Indicators System II (SAI-II) **See CD #2**
- Annex 3. Tele-Information Program for Electronic File Management (PROTEGE) **See CD #2**
- Annex 4. Comprehensive System for Addiction Information Analysis (SIADICC) **See CD #2**
- Annex 5. Information Homologation System for Statistics and Diverse Logistics (SHIELD) **See CD #2**
- Annex 6. Spatial diagnosis of traffic incidents in Ciudad Juarez. **See CD #2**
- Annex 7. Spatial diagnosis of the incidence of criminal activity in Ciudad Juarez **See CD #2**
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- Annex 10. Flip Chart Prevention of Violence and Injuries: What can be done? **See CD #3**
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- Annex 15. Intervention Guide for the Action Program to Reduce the Gap in Mental Health (mh-GAP)
http://www.who.int/mental_health/mhgap/en/
- Annex 16. Manual for the Art Workshop for Violence and Injury Prevention and the Management of Emotions **See CD #6**
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